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(Re	questor's Name)	
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	İ
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Office Use Only



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COVER LETTER

Division of Cor		₹ 11	
SUBJECT:	PRBB L	LC	
	Name of Limit	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	endence concerning this matter	to the following:	
	ELIZABET	H BRAY	
		Name of Porson	
		Firm/Company	
	4007 KIVE	ERVIEW BLYD	
		Address	
	BRADENTO	ERVIEW BLVD Address City/State and Zip Code	
		City/State and Zip Code M636 C YA HOO. (o be used for future annual report notificati	
	MEGANS MO. E-mail address: (t	o be used for future annual report notificati	<u>.017</u>
For further information c	oncerning this matter, please ca	all:	· Come
BETSY &	RAY	at (941) 8/2 - 90 Area Code & Davtime Te	nal Sign
Name o	f Person	Area Code & Daytime Te	lephone Number
			(i) (ii) (ii) (ii) (ii) (ii) (ii) (iii) (i
Enclosed is a check for the	ne following amount:		iis T
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRBB	LLC	
(Name of the Limited Liability (A Florida I	Company as it now appears Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability C Florida document number 405000102853	ompany were filed on	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company	," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		1011000
(Principal office address MUST BE A STREET ADDR	PESS)	7 ()
Enter new mailing address, if applicable:		i i i
(Mailing address MAY BE A POST OFFICE BOX)		· · ·
B. If amending the registered agent and/or regist	ered office address on ou	r records, enter the name of the new
registered agent and/or the new registered office add	ress here:	
Name of New Registered Agent:		
New Registered Office Address:	Enter	· Florida street address
		, Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Type of Action** Title Name | **Address** 4007 RIVERVIEW BLVD Add

BRADENTON, FL 34209 Remove MGR ELIZABETH BRAY Remove Remove Remove Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ELIZABETH BRAY 15 A 99% OWNER

/ IST
Dated NOVEMBER 15T, 2013.
Elizabeth Bry P. Ryan Bray ELIZABETH BRAY P. RYAN BRAY
Signature of a member or authorized representative of a member
ELIZABETH BRAY Y. KYAN BRAY Typed or printed name of signee
,
Page 3 of 3
Filing Fee: \$25.00