L070000 96128

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COVER LETTER

			.*	
CHBIC		, LLC		
SUBJEC	.1:	Name of Lim	nited Liability Company	·
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
	Distribution of Corporations Barn Time, LLC			
		Sam Time, LLC		
		The Belcher Law Firm, P.	Α.	
			Firm/Company	
		P.O. Drawer 2199		
		· ·	Address	
		Fort Myers, FL 33902		
			City/State and Zip Code	
For furth	er information c		· ·	incation)
W. Gus	Beicher II			
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed	is a check for th	ne following amount:		
\$25.	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	Registration S Division of C	Section orporations	Registration Se Division of Co	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Barn Time, LLC			
(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited L Florida document numberL07000096128	Liability Company were filed on	09/20/2007	and as	signed
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability company he	<u>re</u> :		
The new name must be distinguishable and contain the	words "Limited Liability Company," the de	signation "LLC" or the a	abbreviation "I	L.C."
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>			
B. If amending the registered agent and/or agent and/or the new registered office addre		cords, enter the nar	E6.2	waregister
Name of New Registered Agent:	Blackwell, Susan E.		<u> </u>	70
New Registered Office Address:				7 D
	Enter Flori	da street address	9: F	
	City	Florida	Zin 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Michael K. Blackwell	17751 Nalle Road	□Add
		North Fort Myers, FL 33917	≡ Remove
			□Change
			□Add
		□Chs	□Remove
		<u> </u>	☐Change
			□Remove
			□Change
		···	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		·	□Add
			□Remove
			□Change

Susan E.	Blackwell is the sole member of the Company and has contributed an initial \$1000.00 as capital of the	
Company		•
ARTICLI	E IX - MANAGEMENT is deleted in its entirety and replaced by the following:	-
The Com	pany is managed by its sole member, Susan E. Blackwell, whose address is 17751 Nalle Road North Fort	•
Myers, Fl	. 33917.	•
		•
		•
 		,
**		
effective date e: If the dat	if other than the date of filing:	i.0207 ed as
cord specifie s filed.	s a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	r the
ed	April 14 2020	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00