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22 MAY 16 PM 12: 04

T. MATTHEWS
JUL 14 2022

COVER LETTER

	gistration Se ision of Cor		·	4
CUD IF CIT	Brosky Hol	dings, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Lourdes Martinez		
			Name of Person	
		Law Office of Alexis Gonz	zalez, P.A.	
			Firm/Company	
		3162 Commodore Plaza, S	uite 3e	
			Address	
		Coconut Grove, Florida 33	133	
			City/State and Zip Code	
		lourdes@aglawpa.com		
		E-mail address: (to be used for future annual report not	tification)
For further i	nformation c	oncerning this matter, please ca	all:	
Lourdes Ma	rtinez		305 223-9999 at ()	
	Name o	f Person		ne Telephone Number
Enclosed is	a check for th	ne following amount:		
■ \$25.00 l	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section		Street Address: Registration Se	ection	
Di	vision of C	forporations	Division of Co	rporations
	D. Box 632		The Centre of	· · ·
1 13	llahassec, I	L J4J14	2413 IN. MIONTO	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF CORPORATIONS OF

22 MAY 16 PM 12: 04

Brosky Holdings, LLC	
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L11000029407	were filed on 03/09/2011 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	

B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new regist
Name of New Registered Agent:	
New Registered Office Address:	

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

_, Florida __

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
MGR	Ana Gonzalez	3162 Commodore Plaza, Suite 3e	□Add
		Coconut Grove, Florida 33133	■Remove
			[]Change
MGR	Alexis Gonzalez	3162 Commodore Plaza, Suite 3c	= Add
		Coconut Grove, Florida 33133	Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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			□Add
			🗀 Remove
			□Change

			
			
			
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(If an effective d Note: If the	ate inserted in this block does not meet the appl	(optional) or to date of filing or more than 90 days after filing.) Pursuant icable statutory filing requirements, this date will not b	to 605.0201 be listed as
document's e	fective date on the Department of State's record	is.	
ie record speci	ies a delayed effective date, but not an effective	time, at 12:01 a.m. on the earlier of: (b) The 90th day	v after the
ord is filed.	\	,	,
May 1	2022		
Dated		—·/	
		1	
		horized representative of a member	

Filing Fee: \$25.00