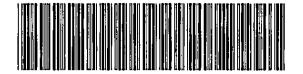
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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	_
(Document Number)		
Certified Copies	Certificates of Status	_
Special Instructions to Filing Officer:		
NC =	Amend	

Office Use Only



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02/04/22--01007--007 **55.00 12.05 12.05 12.05 13.05 14.05 15.05 16.05

MAS

COVER LETTER

Division of Corporations
SUBJECT: BAKB, LLC
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Blair Barone BRK
B.A.K.B. LLC (BRK, LLC
51130 1 100 C Pd = #300
Address
Coconut Creek- JL-33073
City/State and Zip Code drblairbarone Co amail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Blair Barone at 341, 840-1404 Area Code Daytime Telephone Number
Traile of a cisch
Enclosed is a check for the following amount:
□ \$25,00 Filing Fee □ \$30,00 Filing Fee & □ \$60,00 Filing Fee,
Certificate of Status Certified Copy Certificate of Status &
(additional copy is enclosed) Certified Copy (additional copy is enclosed)

TO:

Registration Section

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAKB,	Lh.C
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on $\frac{1\cdot 28\cdot 2}{2000}$ and assigned 22000
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name of the limited liability of the new name of the new name of the limited liability of the new name of the new na	B.R.K., LLC
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Blair Barone 5430 Lyons Rd. #300 Coconyt Creek & JL
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Blair Barone = 3307 5430 Lyons Rd-#304 Coconut Creek=
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent: New Registered Office Address: 5430	lir Barone Lyons Rd-#306
Ccconu	Enter Florida street address Lity Florida 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 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.

In 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 Type of Action **Title** Name Address Arthu Rice 333 Las Olas Way DAdd (Renove) A # 3303 fort Lauderdale Coconut Creek- 71 □Add ☐ Change □Add □Remove Change □Add □Remove □Change

If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Please see notarized
_	assignment of
_	membership interest
_	(in pinK).
_	
	Please renove
	"ArThur Rice" from
_	any association
	including registered: 3
	agent and/or managere
_	
	Thankyou !!
(If an effe <u>Note:</u> I	ve date, if other than the date of filing: 1.29.22 (optional) ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as only a effective date on the Department of State's records.
ord is file	
Dated _	1-29-22
	Signature of a member or authorized representative of a member
	- Blair Barone
	Typed or printed name of signee

Filing Fee: \$25.00