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(Req	uestor's Name)	
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COVER LETTER

TO:	Registration Se Division of Cor		•	
errin		roker World, LLC		
SUB	JECT:	Name of Lim	ited Liability Company	
The	enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Pleas	se return all correspo	ndence concerning this matter	to the following:	
		Denis J. Burke		
			Name of Person	
		Business Broker World, Ll	I.C	
			Firm/Company	
		4729 Sweetmeadow Circle		
			Address	·
		Sarasota, FL 34238		
			City/State and Zip Code	
		denisburke550@yahoo.com	to be used for future annual report notifice	ation V
For (further information c	oncerning this matter, please of		auony
Nina	n Dennison		941 244-4500 ext. ()	
	Nате о	f Person	Area Code Daytime T	elephone Number
Encl	osed is a check for th	ne following amount:		
	\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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 Division of Corporations P.O. Box 6327 Tallahassee, F1. 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

Business Broker World, LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
the Articles of Organization for this Limited Liability Company lorida document number L13000156484	were filed on November 6th, 2013	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	oility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "ELC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		· <u> </u>
		28 38 38 38 38 38 38 38 38 38 38 38 38 38
inter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
		ಶ_ ಹ
If amending the registered agent and/or registered of equistered agent and/or the new registered office address here. Name of New Registered Agent:		er the name of the
New Registered Office Address:		
New Registered Office Address:	Enter Florida street address	
New Registered Office Address:		Zip Code

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 ameading 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>	<u>Address</u>	Type of Action
MGR	Denis J Burke	4729 Sweetmeadow Circle	≅ Add
		Sarasota, FL 34238	Remove
			☐ Change
		· · · · · · · · · · · · · · · · · · ·	□ Remove
			Change
			Add
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fective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing.	(optional)
ote: If the date inserted in this block does not meet the applicable statutor	
ocument's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effect	tive time, at 12:01 a.m. on the earlier o
The 90th day after the record is filed.	are time, at 12.01 and on the come of
Navyankar 20th 2017	
ated November 20th 2017	l .
	A.

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Typed or printed name of signee

Filing Fee: \$25.00