L14000040774

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J. HARRIS

COVER LETTER

10:	Division of Cor		*	
s CHDH	Bri Link Wo	orld, LLC		
SUBJECT:Name of Limited Liability Company				
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspo	ndence concerning this matter	to the following:	
		Brianna Rodriguez		
			Name of Person	
		Bri Link World, LLC		
		 	Firm/Company	
		16850 Collins Ave 112-594	1	
			Address	
		Sunny Isles Beach, FL 331	60	
		bri.rodriguez@icloud.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notific	cation)
For furt	her information co	oncerning this matter, please ca	all:	
Brianna	a Rodriguez		305 7107343	
	Name of	Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	e following amount:		
\$25	.00 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
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

TO **ARTICLES OF ORGANIZATION OF**

Bri Link World, LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our record Liability Company)	<u>ls.</u>)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L14000040774}{L14000040774}$.	were filed on	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	ility Company," the designation "LLC	"or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	al offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	Sunny Isles Beach, FL 33160	
Enter new mailing address, if applicable:		DECVEL 9.09
(Mailing address MAY BE A POST OFFICE BOX)		GA GA
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records re:	s, enter the name of the no
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	
		orida
	City	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

or remoyed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
VP	Marcos Rodriguez	6510 Main Street #107	□ Add
·		Miami Lakes, FL 33014	■ Remove
			Change

		***************************************	□ Remove
		 	Change
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TD 10004	August 9, 2016	
L. Effect	tive date, if other than the date of filing: (optional) Tective 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 605.0207	(3)(b)
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as	the
docun	nent's effective date on the Department of State's records.	
If the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of	:
(b) The	e 90th day after the record is filed.	
Dated	1 AMA 10 2016.	
Datou		
	DA ALLES IS	
	Signatur of a member or authorized representative of a member	
	Brianna Rodviauez 25 57 Typed or printed name of signee	
	Typed or printed name ovsignee	
	D 2.62	
	Page 3 of 3	

Filing Fee: \$25.00