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COVER LETTER

	Registration Sec Division of Corp			
SUBJEC	TT:	Brian Dru-	tman D.C., L	LC
The encl	osed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please re	turn all correspor	dence concerning this matter	to the following:	
		Dr. Bri	Name of Person	······································
			Firm/Company	,
		5509 E	ast Langboat	Boulevard
			Florida 3361: City/State and Zip Code D54 (a) a ol, com o be used for future annual report not	
For furth	er information co	E-mail address: (1 ncerning this matter, please ca		ification)
	•		at (727) 430	- 8834 ne Telephone Number
Enclosed	is a check for the	following amount:		
⊠ \$25.0	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 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 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

Brian Drytman (Name of the Limited Liability Compan	Vas it now appears on our records.)
The Articles of Organization for this Limited Liability Company vi Florida document number <u>L1500094-84</u> :	vere filed on 6-01-2015 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liabilit	y 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)	2529 West Busch Boulevard Suite 100 Tampa, Florida 33618
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2529 West Busch Boulevard Suite 100 Tampa, Florida 33618
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	(000 115
Name of New Registered Agent: Step	then Lawler ESQ Same, just new Camelot Ridge Drive address Enter Florida street address
New Registered Office Address: 64	Camelot Ridge Drive
Brand	City Florida Street dates 33 5 11 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.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member		2(020 APR 23	Plitter	
<u>Title</u>	<u>Name</u>	Address		11:4:09	Type of Action
					🗆 Add
					🗆 Remove
					□Change
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an effective Fote: If the	te, if other than the date of filing:
record spe I is filed.	fies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	April 16 2020. When Whitner of a member or authorized representative of a member.
	Grean Grutnanos
-	Signature of a member or authorized representative of a member
	Brian Drutman D.C. Typed or printed name of signee