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COVER LETTER

| TO: Registration Se Division of Cor | | | |
|--|---|---|--|
| SUBJECT: | BARENZ Name of Lim | IN US HMENTS, L ited Liability Company | +ments, uc |
| The enclosed Articles of | Amendment and fee(s) are sub | | Fillors / CCC |
| | · | _ | |
| ricase return an correspo. | ndence concerning this matter | to the following: | |
| | Davi | D B Mew Z_ Name of Person | |
| | | Firm/Company | |
| | 455 | 7th Aue N # | -,33701 2g @ gmail. Com |
| | Smint | - Petosbung Fl City/State and Zip Code | -,33701 |
| | david g | SAINT DETENS LOW to be used for fluture annual report no | g @ gmail. com |
| For further information co | oncerning this matter, please co | | |
| DAVID Name of | BAREVZ | at (727) 22 Area Code Dayti | ne Telephone Number |
| | | | |
| Enclosed 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 STRICE I/COURTER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| BARENZ J | NVCStments LLG |
|--|---|
| (<u>Name of the Limited Liabi</u> (A Flori | lity Company as it now appears on our records.) da Limited Liability Company) |
| | -/-/- |
| The Articles of Organization for this Limited Liability | · · · — — — — — — — — — — — — — — — — — |
| Florida document number <u>L15000130</u> | 132 |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the lin | nited liability company here: |
| The new name must be distinguishable and contain the words "Li | mited Liability Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | |
| (Principal office address MUST BE A STREET ADD | RESS) |
| | 7. |
| | 16 16 |
| Enter new mailing address, if applicable: | AR FE |
| (Mailing address MAY BE A POST OFFICE BOX) | |
| (muning duaress MAT BE AT 031 OFFICE BOX) | Mary to the second |
| | |
| B. If amending the registered agent and/or regi | istered office address on our records, enter the name of the new |
| registered agent and/or the new registered office ad- | dress here: |
| | 25" |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| | Enter Florida street address |
| | . Florida |
| | City Zıp 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 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

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|------------------|------------------------------------|----------------|
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| ote: If the | date, if other than the date of filing: | g.) Pursuant to e will not be | 605.020 listed a |)7 (is t |
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| | I specifies a delayed effective date, but not an effective time, at 12:01 a.m. th day after the record is filed. | on the ea | arlier (| of: |
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| ated | February 137, 2016 | | | |
| ated | Pauline F. trelma | · | _ | |
| ated | Pauline Thelm. Signature of a member or authorized representative of a member | | - | |

Page 3 of 3

Filing Fee: \$25.00