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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Brenda Rockward Enterprises 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:
Brenda Lee Rockward
Brenda Rockward Enterprises LLC
9803 Elaine Rd Address
Coach rendantife of Muils (on E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Brenda Lee Rockword at (904) 135-1287 Name of Person at (904) Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brenda Rockward E	-nterprises LLC
(Name of the Limited Liability Compa (A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	9803 Elaine Rd
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville, FL 32246
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9803 Flaine Rolling & Jacksonville, FL 3836:
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, enter the mame of the new
Name of New Registered Agent:	
New Registered Office Address:	3 Elaine Ra Enter Florida street address
Jack	SONVILLE, Florida 32246

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Dated January 12	endo X	2018. Lee Roc	Kanu				
		or authorized repre					

Page 3 of 3

Filing Fee: \$25.00