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To:

Division of Corporations
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Account Name : DEAN AND DEAN, LLP
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BEHAN ENTERPRISES, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$60.00

M. SOLOMON

JUL 24 2024

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**ARTICLES OF AMENDMENT
 TO
 ARTICLES OF ORGANIZATION
 OF**

BEHAN ENTERPRISES, LLC

~~(Name of the Limited Liability Company as it now appears on our records.)~~
 (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/07/2016 and assigned
 Florida document number L16000071416.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

NERY SOSA SOTO

New Registered Office Address:

3742 SE 7TH STREET

Enter Florida street address

OCALA

Florida 34474

City

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 Changing Registered Agent, Signature of New Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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>	<u>Address</u>	<u>Type of Action</u>
MGRP	BRIAN M. BEHAN	3742 SW 7TH STREET	☐ Add
		OCALA, FL 34474	☒ Remove
			☐ Change
T	DAWN S. BEHAN	3742 SW 7TH STREET	☐ Add
		OCALA, FL 34474	☒ Remove
			☐ Change
MGR	NERY SOSA SOTO	3742 SW 7TH STREET	☒ Add
		OCALA, FL 34474	☐ Remove
			☐ Change
MBR	ANA LECHUGA PEREZ	3742 SE 7TH STREET	☒ Add
		OCALA, FL 34474	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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TALLAHASSEE, FLORIDA

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 1-22, 27

Signature of a member or authorized representative of a member

NERY SOSA SOTO

Typed or printed name of signee

Filing Fee: \$25.00

Filing Fee: \$25.00