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COVER LETTER

FO: Registration Section Division of Corporations		
SUBJECT: Briter Beginnings 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:		
Antoine Jacques Name of Person Briter Beginnings LLC, Firm/Company		
Firm/Company		
2002 20th Lane Address	— 3	
City/State and Zip Code Tacquis Andi & Yahaa.com E-mail address: (to be used for future annual report notification)	16 Juli - 8 Fil	
E-mail address: (to be used for future annual report notification)	— ల్లు 🏃	- 1 - 1
For further information concerning this matter, please call:		
Antoine Sacquos Name of Person at (754) 366-7192 Area Code Daytime Telephone N	umber	
Enclosed is a check for the following amount:		
Certificate of Status Certified Copy Certified Copy (additional copy is enclosed)	00 Filing Fee, rtificate of Status & rtified Copy litional 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**

Briter Blainnings (Name of the Limited Liability Co. (A Florida Lin	LLC.	ars on our records.)	**	
The Articles of Organization for this Limited Liability Completion of the Articles of Organization for this Limited Liability Completion of the Articles of Organization for this Limited Liability Completion of the Articles of Organization for this Limited Liability Completion of the Articles of Organization for this Limited Liability Completion of the Articles of Organization for this Limited Liability Completion of the Articles of Organization for this Limited Liability Completion of the Articles of Organization for this Limited Liability Completion of the Articles of Organization for this Limited Liability Completion of the Articles of Organization for this Limited Liability Completion of the Articles of Organization for this Limited Liability Completion of the Articles of Organization for the Articles of Organization for the Articles of Organization of of Organizati	pany were filed on _	4/15/2016	and assig	gned
A. If amending name, enter the new name of the limited	·			
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:			ਨੀ	25.63
(Principal office address MUST BE A STREET ADDRES	SS)		سيدر) سيدرو سيدرو موردو	
				- , to =
			7	
Enter new mailing address, if applicable:			TIE (a)	to a to
•••				
(Mailing address MAY BE A POST OFFICE BOX)				1 - 1 1 1 3
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		on our records, <u>ente</u>	r the name o	f the new
Name of New Registered Agent:				<u> </u>
New Registered Office Address:	F F	1		
	Enier Fi	lorida street address		
		, Florida _	7: 0 1	
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent	gent:			

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 **Type of Action** <u>Title</u> **Address** <u>Name</u> MGR Dickenson Elan 2002 20th Lane areenacres FL 33463 ☐ Change □ Add _□ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add; Change . ☐ Remove ☐ Change □ Add □ Remove ☐ Change

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cument'	s effective date on the D	epartment of	State's records	S.			PH
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record The 90	d specifies a delayed th day after the rec	ord is filed	date, but n	ot an effectiv	/e time, at 12	2:01 a.m. on 1	ne earlier
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ated		Signature of a	member or auti	norized represent	ative of a member	• • • • • • • • • • • • • • • • • • • •	

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Filing Fee: \$25.00