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COVER LETTER

TO:	Registration Se Division of Cor						
CHET	BREG LLC						
SUBJI	ECT:		ited Liability Company	g: Person Impany 201A ess I Zip Code ture annual report notification) Graph of the policy of			
The en	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	return all correspo	indence concerning this matter	to the following:				
		ALEXANDRE BURKHA	RDT				
			Name of Person				
		BREG LLC					
			Firm/Company				
	2691 E OAKLAND PARK BLVD, STE 201A						
			Address				
		FORT LAUDERDALE					
	City/State and Zip Code						
		AB@BURKMIAMI.COM					
		E-mail address: (to be used for future annual report notifi	cation)			
For fur	ther information co	oncerning this matter, please ca	all:				
ALEXANDRE BURKHARDT Name of Person			305 904-1608				
			Area Code Daytime	Telephone Number			
Enclos	ed is a check for th	ue following amount:					
\$2	5.00 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:

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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

BREG 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 $\frac{11/10/2016}{}$ and assigned Florida document number $\frac{1.16000207420}{}$.
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 "L.L.C." 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:
B. If amending the registered agent and/or registered office address on our records enter/the name of the man
Name of New Registered Agent: New Registered Office Address: Enter Florida street address City Tip 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
MGR	CHARLES MEDALIE	2691 e oakland park blvd ste 201a	□ Add
		FT LAUDERDALE FL 33306	■ Remove
			Change
MGR	ALEXANDRE BURKHARDT	2691 e oakland park blvd ste 201a	
		FT LAUDERDALE FL 33306	□ Remove
			□ Change
			
		-	□ Remove
			Change
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fective date, if other than the d in effective date is listed, the date must b ote: If the date inserted in this bloc countent's effective date on the Dep	k does not meet the a	ipplicable statutor	ng or more than 90 ry filing requirem	(optional) days after filing ents, this date	.) Pursuan will not	t to 605.0 be listed	020° d as
record specifies a delayed of The 90th day after the recor	effective date, bu d is filed.	it not an effec	tive time, at I	l2:01 a.m.	on the	earlie	го
	. 2017						

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee