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FILED
2018 FEB 13 P # 2
SECRETARY STATES

D. SCOTT FE3 1 4 2019

COVER LETTER .

TO: Registration Security Division of Corp		•	
SUBJECT:	BRADY RI	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	BRAD	Y Richardson Name of Person	
	Brad	Y Rich LLC	
	759_	LAKE HIAW	ASSER Dr
	DRLAN	VDO FL 328 City/State and Zip Code	35
	BRAD E-mail address: (1	SY KW Realty (35 Qgmail.com
For further information c	concerning this matter, please ea	all:	
Brachy Richa	of Person	at (516) Lold Daytime	- 2669 e Telephone Number.
Enclosed is a check for t	he following amount:		□ S60.00 Filing Fee.
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

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

Brady R (Name of the Limited Liability Comp (A Florida Limited)	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number	y were filed on 1192017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial Brady WILLIAM The new name must be distinguishable and contain the words "Limited Liab	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	U900 Turkey Lake Rd Stel-3 Orlando Fl 32819
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	759 LAKE HIAWASSEE ORLANDO FL 32835
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he	office address on our records, <u>enter the name of the new</u> <u>re</u> :
Name of New Registered Agent: New Registered Office Address:	Brady WILLIAM, RICHCINDSOL 759 LAKE HIAWASSEE Enter Florida street address
New Registered Agent's Signature, if changing Registered Agent	clavolo, Florida 32835
	ree to act in this capacity. I further agree to comply with the eperformance of my duties, and I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited hubility

company has been notified in writing of this change.

22

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 = N $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
			Add
			□ Remove
			Change
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			☐ Change
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Note: If t	he date inserted	than the date of the date must be specifed in this block does to make the Department	not meet the ap	pplicable statutor	ng or more than 9 ry filing require	(optional 0 days after filing ments, this date) 3) Pursuant to 5 will not be	605,0207 (, listed as tl
he recor The 90	d specifies a)th day after	delayed effecti the record is fi	ve date, bui led.	t not an effec	tive time, at	12:01 a.m.		rlier of:
D . 1	Feb	8Th	<u> 20</u>	18			FEB 13	
Dated		Ω	D + I	F.				M
Dated		Signature	of a member or	authorized represe	entative of a mem	iber -	D # 22	- 0

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Filing Fee: \$25.00