## L17000083034

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## **COVER LETTER**

TO:		istration Se ision of Cor			·
SUBJE	ст	Brooklyn B			
30631.	CT:		Name of Lim	ited Liability Company	
The end	closed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please (	return	all correspo	ndence concerning this matter	to the following:	
			Emily van den Heever		
				Name of Person	
			Brooklyn Biltong		
				Firm/Company	
			1781 Spyglass Drive Apt 3	395	
				Address	
			Austin, TX 78746		
			emvdheever@gmail.com E-mail address: (	to be used for future annual report not	itication)
For fur	ther in	nformation c	oncerning this matter, please ca	all:	
Emily	van d	en Heever		347 622-3066 at ( )	
		Name o	f Person	Area Code Daytin	ne Telephone Number
Enclose	ed is a	check for th	ne following amount:		
<b>≡</b> \$2.	5.00 F	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:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

BROOKLYN BILTONG LLC

2021 OCT -8 AH 7: 46

(Name of the Limited	Liability Company as it now appears on our Florida Limited Liability Company)	TALLAHAS OF STATE
The Articles of Organization for this Limited Liab Florida document number 1.17000083034		
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BO		
B. If amending the registered agent and/or reg agent and/or the new registered office address Name of New Registered Agent:		enter the name of the new register
New Registered Office Address:		
	Enter Florida stree	t address
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Regard the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to manyly reflect a change in the register.	- agent and agree to act in this capacit and complete performance of my dut	ties, and I am familiar with and r 605, F.S. Or, if this document is

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	Emily van den Heever	17538 Seidner Rd Winter Garden, FL 34787	□Add
			Remove
			□Change
			□Add
			□Remove
			□ Change
			□Remove
			□Add
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			□Remove
			□Change

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ote: li	e date, if other than the date of filing:
record Lis file	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
ated _	9/30/21
	Envatt
	Signature of a member or authorized representative of a member