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COVER LETTER

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TO: Registration Section Division of Corporations
SUBJECT: Brick City Brothers Global LLC Name of Limited Limbility Company
The enclosed Articles of Amendment and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Larry Jones Name of Person
Buck- City Brothers Calobal LLC
431 VIII 4 ye Blud Ste # 905-133
Wist Palm Beach FL 33409 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
O+15 Squaders II at (S61) 319-3300 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25 00 Filing Fee S30.00 Filing Fee S 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

Brick City Scothers (Name of the Limited Liability Compa (A Florida Limited)	Colubat LL	_ C		
(Name of the Limited Liability Compa (A Florida Limited)	inv as it now appear Liability Company)	s on our records.)	+
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000124428</u>	were filed on	06 07	<u> 2017</u> and	d assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company he	<u>re</u> :		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the de	esignation "LLC"	or the abbreviatio	in "L.L.C."
Enter new principal offices address, if applicable:	\mathcal{N}/α	· · · · · · · · · · · · · · · · · · ·		
(Principal office address MUST BE A STREET ADDRESS)				
				
Enter new mailing address, if applicable:	NIT	- ,		907.3
(Mailing address MAY BE A POST OFFICE BOX)			· .	<u> </u>
		 	·	<u>ණ</u> භ
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on <u>e</u> :	our records,	enter the na	
Name of New Registered Agent:			~ 	
New Registered Office Address:				
	Enter Flori	da street address		
	City	, Flor	rida	

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	Otis Sanders I	931 Village Boylerard	
		Stc #905-133	☐ Remove
		West Palm Beach, FL 33409	Change
			☐ Remove
			☐ Change
			□ Remove
			Change
			6. Pyry 02.
			Remove
			☐ Change
			□ Add
			□ Remove
			Change
			Add
			□ Remove
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Filing Fee: \$25.00