117000 194604

	1
(Requestor's Name)	,
(Address)	•
(Address)	
	1
(City/State/Zip/Phone #)	<u> </u>
(Only Guid Ziph Hone #)	'
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Sasiness Elliny Haine)	
	1
(Document Number)	í
Certified Copies Certificates of S	Status
Special Instructions to Filing Officer:	i
, eposter more section to a ming conserv	
	;
	i
<u></u>	!

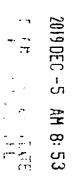
Office Use Only



700337514997

12/05/19--01006--015 **25.00

S TALLENT JAN 13 2020



Grand

COVER LETTER

Division of Co			
SUBJECT:	BRIEF HU	MES INT	CRNATUNAL
	Name of Limi	ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub-	nitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		KRYSTEL C	FINLEY
		DRIEF FICH	MES INTERHATIONAL
	14	Firm/Company 1992 SE FITO 121-187 ST /	MES INTERHATIONAL CHI SPRINGS DR.
		Address	ucic FL 34952
	<i>PO</i>	PRT ST. LL	OCIE FL 34952
		City/State and Zip Co	xle
	E-mail address; (t	o be used for future ann	NEFT-LOMES.COM
For further information	concerning this matter, please ca	di:	
KRYSTEL	- C FINLEY	at(756)	S78 - 7445 Daytime Telephone Number
Name	of Person	Area Code	Daytime Telephone Number
Enclosed is a check for	the following amount:		
₾ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing For Certified Copy (additional copy is	Certificate of Status &

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

BRICF HO	MeS	INTTERNIATIONAL LLC			
(Name of the Limited (A	Liability Co. A Florida Limit	mpany as it now appears on our records.) ted Liability Company)		_	
The Articles of Organization for this Limited Lial		any were filed on	and	assign	ned
This amendment is submitted to amend the follow					
A. If amending name, enter the new name of t	he limited l	iability company here:			
N A The new name must be distinguishable and contain the wor					
The new name must be distinguishable and contain the wor	rds "Limited L	iability Company," the designation "LLC" or the ab	breviation	ı "L.L.C	- ,,
Enter new principal offices address, if applical	ole:	N/A			
(Principal office address MUST BE A STREET	ADDRESS	2			
			- 1 · 1	 610	
		1		DEC	1 (
Enter new mailing address, if applicable:		NA		7	• • • • • •
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>		,	P	<u>; υ ;</u>
			· ·	œ	
	,		- : <u>(</u>	53	
B. If amending the registered agent and/or registered agent and/or the new registered offi-			the nar	ne of	the nev
Name of New Registered Agent:		NJA			
New Registered Office Address:					
		Enter Florida street address			
	-	Florida			
	ı	City	Zip Ce	nde	

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, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR =	Manager
AMBR =	Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	KELVIN MILLER	1992 SE HIGH SPRINGSI)E	_ Add
		Por St. Lucie FL 31952	Premove
			Change
			Add
			Remove
			Change
			
			Remove
			Change
			D Add
			□ Remove
			Change
			□ Add
			Remove
			Change
			O Add
			_□ Remove
			☐ Change

_	
_	
_	
_	
_	
_	
_	
_	
effec te: It	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed and's effective date on the Department of State's records.
he 9	and specifies a delayed effective date, but not an effective time, at $12:01~a.m.$ on the earlier 0.000 00th day after the record is filed.
ed _	107 NOVEMBER 2019 Lugare Lineary Signature of amember or authorized representative of a member
	Lugarel Linery
	Signature of authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00