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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: AShley BROOKE HARRIS, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
AShley BROOKE FIETCHET
Ashtey Brooke Harris, LLC
4521 10th Street
Vero Beach, FL 32966 City/State and Zip Code Ashley in vero a gmail com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
AShley Fletcher at (772) 713-9159 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, 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

ASNI-LY BROOKE TUR (Name of the Limited Liability Company (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company w Florida document number <u>L1700622265</u> 5	were filed on $\frac{10 26 2017}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability ASNI-LY BROOKE FIET The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4521 10th Street
(Principal office address MUST BE A STREET ADDRESS)	Ven Beach, Fl 32966
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	
New Registered Office Address:	City Cate Bubler Cate Bubler Switch Switch

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
			Add
			□ Remove
			Change
			□ Remove
			Change
			Remove
			<u>-</u>
			Remove
			Change
			☐ Remove
			□ Change
			Remove
			Change

	
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ective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filite: If the date inserted in this block does not meet the applicable statutor cument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effec he 90th day after the record is filed.	ctive time, at 12:01 a.m. on the earlier
ed October 18 . 2018.	
V	(() () ()
Signature of a member or authorized represe	entative of a member

Page 3 of 3

Filing Fee: \$25.00