## 1180000 19868

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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## **COVER LETTER**

ban LLC	,		
	Name of Lim	ited Liability Company	
icles of A	Amendment and fee(s) are sub	mitted for filing.	
orrespor	dence concerning this matter	to the following:	
	Aaron Thalwitzer, Esq.		
		Name of Person	
	Gordon & Thalwitzer		
		Firm/Company	
	257 N. Orlando Avenue		
		Address	
	Cocoa Beach, FL 32931		
		City/State and Zip Code	
	aaron@brevardlegal.com		<del></del>
nation co			ittication)
ŗ		321 779-4777	
Name of	Person	at () Area Code Daytin	ne Telephone Number
ck for the	e following amount:		
, 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)
		Street Address: Registration Sc	ection
Division of Corporations		Division of Corporations	
		The Centre of	
	ban LLC icles of A corresponding for the Address ration S on of Coox 6327	Aaron Thalwitzer. Esq.  Gordon & Thalwitzer  257 N. Orlando Avenue  Cocoa Beach, FL 32931  aaron@brevardlegal.com E-mail address: ( nation concerning this matter, please c  Name of Person  ck for the following amount: (Fee S30.00 Filing Fee & Certificate of Status  Address: ation Section on of Corporations ox 6327	ban LLC    Name of Limited Liability Company

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it to (A Florida Limited Liability C Florida Limited Liability C Florida document number L18000019868  This amendment is submitted to amend the following:			
Florida document number L18000019868	ed on 1/22/2018 and assigned		
This amendment is submitted to amend the following:			
a. If amending name, enter the new name of the limited liability con	ipany here:		
Bad Company, LLC			
he new name must be distinguishable and contain the words "Limited Liability Compa	any," the designation "LLC" or the abbreviation "L.L.C."		
Inter new principal offices address, if applicable:	217 W Seminole Ave		
• • •	Suite 102		
Melbo	urne, FL 32901		
217 16	Seminole Ave		
.nter new maning address, it applicable:			
Mailing address MAT BE A POST OF FICE BOAT	Suite 102 Melbourne, FL 32901		
Melbo	urne, FL 32901 		

## New Registered Agent's Signature, if changing Registered Agent:

Dadhan II C

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.

City

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
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		<del>.</del>	□Remove
			Change
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. Effective date, if other than t	the date of filing:		(optional) n 90 days after filing.) Pursuant to 605.0207 (3)(
(If an effective date is listed, the date Note: If the date inserted in this document's effective date on the	s block does not meet the	applicable statutory filing requ	n 90 days after filing.) Pursuant to 605.0207 (3)( irements, this date will not be listed as the
the record specifies a delayed effect ecord is filed.	ctive date, but not an effe	ctive time, at 12:01 a.m. on the	earlier of: (b) The 90th day after the
March 5	2020		
Dated March 5		·	
	A		
<del>_</del>	Signatural of a malabar	or authorized representative of a m	ambor

Typed or printed name of signee

. .