L18000072292

(Requi	estor's Name)	<u> </u>
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SECRETARY OF STATE

COVERLETTER

TO: Registration Section Division of Corporati	ons			
SUBJECT:SIMP	YCC LLC	2. 0		
•	Name of Limited Liabi	.ity Company		
The enclosed Articles of Americ	lment and fee(s) are submitted fo	r filing.		
Please return all correspondence	concerning this matter to the fol	lowing:		
-	Mardia Brow	J) ine of Person		
			2024 SE	
	Fi	m/Company	FEB FEB	_
<u> 1</u>	1200 Biscayne	Blvd Apt	· 612	
	miami Fl	33181	NOWFEB 26 PM 3: 57 SECRETARY OF STATE SECRETARY OF STATE O O O O O O O O O O O O O	
_ (officialsimplyby	ate and Zip Code Outual and Code Tor future annual report notifi	ul.com	i
For further information concern	ing this matter, please call:			
Mardia Brov Name of Person	JY) a	1 (304), 989 Area Code Daytime	-6564 Telephone Number	
Enclosed is a check for the follo	owing amount:			
☐ \$25.00 Filing Fee ☐ :	Certificate of Status C	5.00 Filing Fee & ertified Copy dditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Naming Address: Registration Section Division of Corpor		Sirver Adultess: Registration Sec Division of Corp		
Tallahassee, FL 32		THE CEIRIE OF 1	Street, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SIMPLY CC LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) hability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000072792</u> .	were filed on MONCO 18 2018 and assigned
cans amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here: BYOWN 610BQ1 CNTODY SES LLC
The new name must be distinguishable and contain the words. Entimed Liabil	ny Company," die designation LLC" of the abbreviation L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	7249 NW 33101 St BCE 612 miami, FL 33122
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11200 BISCAYNE BIVOL Apt 612 MIGMI FL 3318
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	<u>ග යි</u>
New Registered Office Address:	Enter Florida street address
	Cin Florida Cin Zip Code
New Registered Agent's Signature, if changing Registered Agent:	mor w
nereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

It 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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fective date, if other than the date on effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Depa	specific and car does not meet	the applicab	date of filing or t le statutory filin	nore than 90 days	optional) after filing.) Pur . this date will	suant to 60 not be 11:	05.0207 Sted as
record specifies a delayed effective datis filed.	ite, but not an	effective time	c, at 12:01 a.m.	on the earlier o	f: (b) The 90	th day afi	ter the
ated February 20th	Machinature of a men	DO24	ed representativ	e of a member			
Mard		nali⁄)	•				