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(Re	questor's Name)					
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FILED
SECRETARY OF STATE
SECRETARY OF STATE

N BRUCE JUL 31 2018

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 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:
Tina Marria White Name of Person
Brilliant Minds Strategics, INC.
808 West Blood First Street
RIVIERA BEACH FL 3344 For E
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TINA MARIA White at (561), 766-2543 5. Name of Person at (561) Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status □ Certified Copy

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

MTW BESHI	et, LL	_
(A I	ability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabi Florida document number	ity Company were filed on <u>JUNE 212018</u> and a 6257 (L18660156257)	assigned
This amendment is submitted to amend the following	ıg:	
A. If amending name, enter the new name of the The new name must be distinguishable and contain the words		JM NAMA
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A	7	Revet Byoy
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.)	SECRETARY OF TALLAHASSEE F	
B. If amending the registered agent and/or registered agent and/or the new registered office	egistered office address on our records, enter-the-nam	e of the new
Name of New Registered Agent: New Registered Office Address:	PRINIANT MINDS STORATEGIES IN	<u>'C.</u>
	Enter Florida street address Nu City Florida Zip Cod	e

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
MCR	Dale Squaders	806 West Frist Street	
		RIVERA BEACH, FL 33464	Remove
			Change
MER	Bailliant Maids Strakgies, INC.	808 West First Street	& Add
	Strakgies, INC.	Rivera Beach, FL 33404	□ Remove
			Change
AMBR	Tina Maria White	808 West First Sheet	Æ Add
		Riviera Beach-FL 33704	□ Remove
1 <u>m3R</u>	Pale Saunders	808 West First Streets.	_₹ Add
		RIVIERA BEACH FL 334	Remove
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Tan effective <u>Note:</u> If the	ate, if other date is listed, to e date inserted effective date	the date mus d in this bl	it be specif ock does	fic and o not me	cannot be eet the a	e prior to applicab	date of fi	ling or m	ore than '	90 days	ption after fi this d	ling.) I	Pursuun ill not	t to 605. be liste	020 d as
ne record The 90tl	specifies a h day aftei	delayed the rec	d effecti ord is fi	ive da iled.	ate, bu	it not a	an effe	ctive t	ime, a	t 12:()1 a.ı	π. o	n the	earlie	r o
Dated	Suly		0	<u>.</u> .	30	<u>8</u>	. •								
0_	Ima	ml	Signature	tofam	ember o	r authori:	zed repre	sentative	of a men	nber					

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Page 3 of 3

Filing Fee: \$25.00