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((Requestor's Name)
	(Address)
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	(Document Number)
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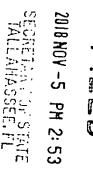
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COVER LETTER

Div	ision of Corpo	rations			
SUBJECT:	R&JR STORE	E, LLC			
		Name of Limite	ed Liability Company		
The enclosed	Articles of Ar	mendment and fee(s) are subm	itted for filing.		
Please return	all correspond	ence concerning this matter to	the following:		
		ABDUL AMIN			
			Name of Person		
			Firm/Company	 	
		9548 PHIPPS LANE			
			Address		
		WELLINGTON, FL 33414			
		ROMELSS@YMAIL.COM	City/State and Zip Code		
		E-mail address: (to	be used for future annual re	port notification)	
For further in	nformation con	cerning this matter, please cal	l:		
ABDUL AM	IIN		ot (0653	
	Name of P	erson	Area Code	Daytime Telephone	Number
Enclosed is a	check for the	following amount:			
≘ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	sed) (60.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)

TO:

Registration Section

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

FILED

R&JR STORE, LLC

2018 NOV -5 PM 2: 53

(Name of the Limited Liability Company as it now appears on our records:) CRETARY JF STATE

(A Florida Limited Liability Company)

TALLAGE SEE FI TALLAHASSEE, FL The Articles of Organization for this Limited Liability Company were filed on 10/25/2018 and assigned Florida document number ______L18000251769 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NEXT LEVEL BUSINESS ENTREPRENEURS, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 = N $AMBR = A$	lanager Luthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Remove
			☐ Add
			☐ Remove
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'an eff <u>lote:</u>	ve date, if other than the date of filing:
	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
	NOURMBER OI.
Dated	11/1/2018.
	- (Agua Dine
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00