118000288503

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COVER LETTER

TO: Registration Sec Division of Corp		•	
SUBJECT:	LBB, LLC Name of Limit	ed Liability Company	
	Amendment and fee(s) are subn		
		Bukes Name of Person	
		Firm/Company	
		(M. Jacksonville.	
	Jacksonville Zacbruke E-mail address:	City/State and Zip Code City/State and Zip Code Color of Mail. (one to be used for future annual report notified	cation)
For further information of	concerning this matter, please ca		
Zac Brown	of Person	at (<u>355</u>) <u>720 - (</u> Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
던 \$25.00 Filing 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)
	DIC ADDRESS.	STRFFT/COURT	ER ADDRESS:

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

STREET/COURIER ADDR'
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLBB,	LLC	
(Name of the Limited L.) (A.)	iability Company as it now appears on our lorida Limited Liability Company)	<u>recoras.</u>)
The Articles of Organization for this Limited Liabil Florida document number <u>L18000286503</u>	ity Company were filed on $\frac{12/1}{3}$	7/18 and assigned
This amendment is submitted to amend the followir	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A	e:	n "LLC" or the abbreviation "L.L.C.
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our r e address here:	records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stree	et address
		, Florida
-	City	Zip Code

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 wit 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 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 a or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Richard McIntyre	8701 Shimmering Pine PL	🗹 Add
		Sanford, FL 32771	□ Remove
			Change
M6R	Adam Lafferty	do 1888 Brackenhurst Pl	□ Add
		Lake May, FL 32746	□ Remove
			Change
			Add
			Remove
			Change
			□ Add
			□ Remove
			Change
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			□ Remove
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	$\frac{1}{2}$
E. Effect	live date, if other than the date of filing: 7 / 1 / 9 (optional) Rective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docun	nent's effective date on the Department of State's records.
If the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of e 90th day after the record is filed.
(0) 1116	s John day after the record is med.
15	10/1/10 7.019
Dated	
	Signature of a member or authorized representative of a member
	Zachery Broker
	Typed or printed name of signee

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 3 of 3

Filing Fee: \$25.00