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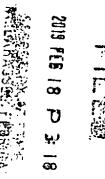
	(Requestor's Name)	
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COVER LETTER

TO:	Registration Se Division of Cor			
	BANDIT	NE ENTERPRISES LLC		
SUBJ	ECT:			
		Name of Lim	ited Liability Company	
The en	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		R. BRADFORD ENGELI	IARDT	
			Name of Person	
			Firm/Company	
		7660 NEMEC DR		
			Address	
		WEST PALM BEACH, FI	. 33460	
		rbepp@bellsoutlunet	City/State and Zip Code	
		E-mail address; (to be used for future annual report notifi	ication)
For fu	rther information c	oncerning this matter, please ca	all:	
R. BR	RADFORD ENGEI	.HARDT	561 704-6432	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	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)

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

BANDIT ONE ENTERPRISES LLC

(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	y as it now appears on our records iability Company)	9'FE\$ 18 P 3≠18
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.19000023171}{1.19000023171}$	were filed on 01/28/2019 54	SCAN CONTROL OF THE STATE OF TH
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ty 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 of registered agent and/or the new registered office address here		, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flo	rida
	<i></i>	ry come

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, <u>enter the title, name, and address of each person_being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR ANTHONY J. CARUSO	ANTHONY J. CARUSO	8635 CYPRESS SPRINGS RD	
		LARL MONECLE DE ANAGE	B Add
		LAKE WORTH, FL 33467	Remove
			Change
			Remove
			Change
		Add	
		-	☐ Remove
			Change
		☐ Remove	
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	- 11	□ Remove	
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lt an effe <u>Note:</u>	ve date, if other than the date of filing:
	ord 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.
Dated .	2-6-19
	2-6-19 R. Gle Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	R. BRADFORD ENGELHARDT

Page 3 of 3

Filing Fee: \$25.00