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2019 JUL 25 PM 3: 43

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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Brijodom LLC 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:
Dominique Wight
Briodom LLC FloorCompany
1012 E. Gonzalez St Unit B
Pensacola FL 32503  City/State and Zip Code  Brijo dow LLC Q gmail. com  E-man address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dominique Wright at (830) 734-4268  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigsquare \$

#### MAILING ADDRESS:

TO:

Registration Section Division of Corporations P.O. Box 6327

#### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clitton Building

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	-C		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on ou Liability Company)	r records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L1900041782</u>	y were filed on <u>Feb</u>	11, 2019	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	bility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designati	on "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			20
(Principal office address MUST BE A STREET ADDRESS)		TACL ALL	19 11
Enter new mailing address, if applicable:		HASSE	5 P
(Mailing address MAY BE A POST OFFICE BOX)			<u>3</u> 3
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	office address on our o	records, enter the	e name of the n
	<u> </u>		
Name of New Registered Agent:		_	
New Registered Office Address:	Enter Florida stree	et address	<del></del>
		, Florida	
<del></del>	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 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 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
<u>AMB</u> R	Josiah Wayne Ne Camp	2301 w Michigan	
		Apt 24	X Remove
		Pensacola, FL 325	26 □ Change
MGR	Briana Renee Moure	4412 Nora ave	
		Pace, FL 32571	□ Remove
			<b>⊄</b> Change
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. If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an eff Note:	ive date, if other than the date of filing:
	cord 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	17 July . 2019.
	Signature of a member or authorized representative of a member
	Dominique Wright  Typed or printed name of signed