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## **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBJEC		nternational LLC		
NUBJEX		Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	·	
		Joseph N. Perlman, Esquir	e	
			Name of Person	<del></del>
		Joseph N. Perlman Law Fi	rmı	
		-	Firm/Company	<u>.</u>
		28461 U.S. Highway 19 N	orth	
			Address	<del></del> _
		Clearwater, FL 33761		
		· O - I I I I I	City/State and Zip Code	<del> </del>
		joe@perlmanlawfirm.com E-mail address: (	to be used for future annual report notification	on)
For furth	ner information c	oncerning this matter, please c	all:	
Joseph N	N. Perlman		727 536-2711	C
	Name o	f Person	at ()	phone Number
Enclosed	d is a check for th	ne following amount:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<b>■</b> \$25.	.00 Filing Fec	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		Street Address: Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street. Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida document number 1.19000045757  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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 registeragent and/or the new registered Agent:  New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  City  New Registered Agent's Signature, if changing Registered Agent:  It hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with to 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, E.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	Bay Blvd. International LLC			
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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 register agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  City  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent and agree to act in this capacity. I forther agree to comply with to provisions of all statutes relative to the proper and complete performance of my duties, and 1 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 603, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability	(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)		
A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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 register agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  City  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		ility Company were filed on 02/14/2019	and a	ssigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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 register agent and/or the new registered office address here:    Name of New Registered Agent:	This amendment is submitted to amend the follow	ing:		
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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 register agent and/or the new registered office address here:    Name of New Registered Agent:	Enter new principal offices address, if applicab	le:		
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New Registered Office Address:    Enter Florida street address   Florida     City   Zip Code     New Registered Agent's Signature, if changing Registered Agent:   Power of 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			<u>ر ۲</u>	**************************************
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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				$\mathcal{P}_{\mathcal{P}}$
	provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the reg	and complete performance of my duties, and I am f red agent as provided for in Chapter 605, F.S. Or, gistered office address, I hereby confirm that the lin	amiliar w if this doc	ith and cument is

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
AMBR	Vincent Ciccone	2401 Bay Boulevard, Unit A	<b>■</b> Add
		Indian Rocks Beach, FL 33785	□Remove
			□Change
	<del></del>		□Add
			□Remove
			□Change
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ffective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing of the:  If the date inserted in this block does not meet the applicable statutory frocument's effective date on the Department of State's records.	(optional) or more than 90 days after filing.) Pursuant to 605.0	020 d a
record specifies a delayed effective date, but not an effective time, at 12:01 a.r d is filed.	n. on the earlier of: (b) The 90th day after	the
June 30 2021		
Pated Tank 30		
Signature of a member or authorized representat	ive of a member	

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Filing Fee: \$25.00