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## **COVER LETTER**

	istration Sec ision of Corp					
SUBJECT:	BIG BUDD	HA, LLC				
Jobacci.		Name of Limi	ted Liability Company			
The enclosed	I Articles of A	Amendment and fee(s) are subi	nitted for filing.			
Please return	all correspor	ndence concerning this matter t	to the following:			
		Nancy B Gonzalez				
			Name of Person			
		Law Offices of N. Betty Go	onzalez PA			
			Firm/Company	<del></del> _		
		2151 S Le Jeune Rd Ste200	)			
			Address			•.
		Coral Gables FL 33134			19	13 <u>1</u> 7
		nbetty@nbg-law.net	City/State and Zip Code		19 MAY -	; `` ;
		E-mail address: (t	o be used for future annual report	notification)	<b>~</b> >	
For further i	nformation co	oncerning this matter, please ca	ill:		ZI H.d	수 무 무기
Nancy B Go	nzalez		305 4284800 at ( )		   P#12: u	TORPORATIONS
	Name of	Person		time Telephone Number		35
Enclosed is	a check for th	e following amount:				
■ \$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Certificate o Certified Co <sub>1</sub> (additional copy	f Status & py	

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

BIG BUDDHA, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on April 15, 2019 and assigned Florida document number L19000103051 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 Enter new principal offices address, if applicable: 13110 SW 88th Ln #C-203 Miami, FL 33186 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 13110 SW 88th Ln #C-203 Miami, FL 33186 (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.

City

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>	<u>Address</u>	Type of Action
MGR	LIANNETTE ALTUVE	13110 SW 88 LN #C203	
		MIAMI, FL 33186	
		MIMMI, LC 33100	□ Remove
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