L19000121322

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JUN 1 7 2019 S. YOUNG -

COVER LETTER

TO: Registration S Division of Co			
BRNV IN	VESTMENT LLC	•	•
SUBJECT.	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Rene Botsoe		
		Name of Person	
	BRNV INVESTMENT L	LC	
		Firm/Company	
	97013 Harbor Concourse	Circle	
		Address	
	Fernandina Beach, FL 320	034	
		City/State and Zip Code	
	renebotsoe@gmail.com	(. I	×
For further information	concerning this matter, please c	(to be used for future annual report noti all:	neation)
Rene Botsoe		585 414-0994 at ()	
Name	of Person		e Telephone Number
Enclosed is a check for	the following amount:		
■ \$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:

TO:

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

BRNV INVESTMENT LLC	
(<u>Name of the Limited Liability Company as i</u> (A Florida Limited Liability	t now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were	filed on MAY 6, 2019 and assigned
Florida document number L19000121322	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	ompany here:
BRNV INVESTMENTS LLC	
The new name must be distinguishable and contain the words "Limited Liability Con	npany," 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:	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	07. 8.
	9
 If amending the registered agent and/or registered office a registered agent and/or the new registered office address here: 	ddress on our records, enter the name of the
The second distribution of the new tensor end of the dadress nere.	
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

, Florida

Page 1 of 3

MGR = Manager AMBR = Authorized Member					
<u>Γitle</u>	<u>Name</u>	Address	Type of Action		
			☐ Remove		
			Change		
					
			☐ Remove		
		-	Change		
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		 	Change		
<u>-</u> _			Add		
			Remove		
					
		.			
			☐ Remove		
			☐ Change		

		 .
		
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ffective	late, if other than the date of filing: (optional)	
an effecti lote: If t	e 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 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be seffective date on the Department of State's records.	605.0207 listed as
recore The 90	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the eath day after the record is filed.	arlier of
ated	May 23, 2019.	
	Signature of a member or authorized representative of a member	_
	Supplement of a monitori of authorized representative of a member	

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Filing Fee: \$25.00