19000140848

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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		
	Bud & Jane	LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Jene Brown Velasco		
			Name of Person	·
		Bud & Jane LLC		
			Firm/Company	
		2705 NW 71st Blvd		
			Address	
		Boca Raton Fl 33496		
			City/State and Zip Code	
		je.badgerrock@gmail.com		
		E-mail address; (to be used for future annual report no	tification)
For further in	nformation c	oncerning this matter, please co	all:	
Jene B Vela	sco		561 289-2819 at()	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a	check for th	ne following amount:		
□ \$25.00 E	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)
	iling Addres gistration S		Street Address: Registration S	ection
Div	vision of C	orporations	Division of Co	orporations
). Box 632 Hahassee, I		The Centre of	Tallahassee oe Street, Suite 810
الفا	nanassee, I	し フムコ 1寸	2412 N. MOIN	or succe, same orv

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bud & Jane LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
he Articles of Organization for this Limited Liability Company v	were filed on 08/05/2021	and assigned
lorida document number L19000140848		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabil	ity company here:	
aud & Jane Collect1ve LLC		
he new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" (or the abbreviation "L.L.C."
inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		ACR
		5, 8 n
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nter new mailing address, if applicable:		m £ Pig
Mailing address MAY BE A POST OFFICE BOX)		
		- h-
		9
. If amending the registered agent and/or registered office ac gent and/or the new registered office address he <u>re</u> :	ldress on our records, <u>enter th</u>	e name of the new register
 		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Flor	
	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
MGR	Samuel Ballin	2705 NW 71st Blvd Boca Raton, FL 33496	= Add
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<u>te:</u> If the date insert	er than the date of f , the date must be specifi ed in this block does i ate on the Department	not meet the applic	cable statutory filing	(option one than 90 days after grequirements, this	nal) filing.) Pursuant to 605.020 date will not be listed a
cord specifies a dela s filed.	yed effective date, bu	t not an effective t	ime, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after th
		2021			
August 05th	Ola.	Biown	Thelaso	č	
ted August 05th	Signature	Bioun	orized representative	ŭ	

Filing Fee: \$25.00