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## **COVER LETTER**

TO: Registration Se Division of Cor		<b>.</b>	
SUBJECT: Bre	ez y Investme	nt Financina LLC	
The analysis Assistance	Amendment and fee(s) are sub	united for filing	
The enclosed Afficies of .	Amendment and recist are suc	athited for annig.	
Please return all correspo	ndence concerning this matter	to the following:	
	Jayson Va	Name of Person	
		-	
		Firm/Company	
	6429 SW 2	oth CT	
	6429 SW 2	Address	
	Miramor FL	33023 City/State and Zip Code  2014 Fine X 100 91  to be used for future annual report hot	
		City/State and Zip Code	
	Breezy invest	nen+firmxing@gn	neil.com
For further information co	oncerning this matter, please c	·	incation,
	<i>11</i> ' .	//8/	-00-
Jayson Ca	Mesas Person	at ( <b>954</b> ) <b>97/-0</b> Area Code Daytin	ne Telephone Number
Taine of	· · · · · · · · · · · · · · · · · · ·	Then code to ay.i.i.	
Enclosed is a check for th	e following amount:		
V. \$25.00 Filing Fee	_	□ ess oo eula, es., e	C SAO OO Eiling Esa
€ 525.00 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	s:	Street Address:	
Registration S	Section	Registration Se	
Division of Co P.O. Box 632		Division of Co The Centre of	•
Tallahassee, F			pe Street, Suite 810
		Tallahassee, FI	. 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited L. (A.F.	n+ 5 nanc	na lec			
(A F	lorida Limited Liabilit	y Company)	r records.)		
The Articles of Organization for this Limited Liabil Florida document number <u>L19000/982</u>		filed on <u>08/0</u>	5/2019	and assig	yned
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	limited liability c	ompany here:			
The new name must be distinguishable and contain the words	"Limited Liability Co.	mpany," the designati	on "LLC" or the abb	previation "L.L.	C."
Enter new principal offices address, if applicable	<u> </u>				
(Principal office address MUST BE A STREET A	<u>DDRESS)</u>		<del></del>		
				<u> </u>	<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>			<del></del>	
B. If amending the registered agent and/or regis agent and/or the new registered office address he	tered office addre ere:	ss on our records	, enter the name	of the new	registered
Name of New Registered Agent:	Jayson	Valentin ( Sw 20 <sup>th</sup> Enter Florida street	Culleia5	T (3)	.: <del></del> ;
New Registered Office Address:	6479	Sw 20 <sup>14</sup> Enter Florida stree	CT rt address	OF ST	<u>D</u>
_	Micama		, Florida	33083 Zip Code	<u> </u>
	~	***		. 7	

## 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 Changing Rogistered 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	Nicholas Andrew Deneer	6/40SW38+4CT	□Add
		Davie FL 3334	[ERemove
MGR	Jayson Valerin Calleias	6429 SW 20th CT	□Add
		Miranor FL 33024	□Remove
			[LChange
			□Add
			□Remove
			□ Change
	<del></del>		□Add
			□Remove
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			□Add
			□Remove
			□Change
			□Add
			□Remove
			C Chunna

_	Nothing else to be amended, just the removal
_	Authorized Member.
_	Authorized Member
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Note:	re date, if other than the date of filing:
e record rd is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	December 2nd 2021
	In Valle
	Signature of member or authorized representative of a member

Filing Fee: \$25.00