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#### **COVER LETTER**

BFR Produ	ucts LLC			
SUBJECT:	Name of Lin	nited Liability Company	<del></del>	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspond	ondence concerning this matter	to the following:		
	Jose L Burgos	929 - 433 - 8184	1	
		Name of Person	<del></del>	
	2212 1 1 1 1 1 1 1	Firm/Company	<del></del>	
	3212 Azalea Blossom Dr	Address		
	Plant City, FL, 33567	A content		
	joseburgos0233@gmail.com	City/State and Zip Code	2	
	E-mail address: (	to be used for future annual report notification	023 H	
For further information of	concerning this matter, please of	all:	AR AR	
Ana E Felix		718 6884218	5 6	Ti
Name o	of Person	at () Area Code Daytime Tele	2023 MAR 10 PH 1: 32 St. Charles A CE. FL phone Number	
Enclosed is a check for t	he following amount:		, LE <b>2</b>	
□ \$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:
Registration Section
Division of Corporations

TO:

Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Street Address:

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

BFR Products LLC		
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Lubility Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on Jan 8, 2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Flowreveide LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3212 Azalea Blossom Dr	
(Principal office address MUST BE A STREET ADDRESS)	Plant City, Fl	
	33567	
Enter new mailing address, if applicable:		DZ3 HAR
(Mailing address MAY BE A POST OFFICE BOX)		6
		P
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
** * · · · · · · · · · · · · · · · · ·	, Flori	da

#### 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 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 =	<b>Authorized Member</b>

<u>Title</u>	Name	Address	Type of Action
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			□Change
			□ Add
			□Remove
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music distribution, artist n	nanagement, artist development, music cor	sulting, show bookings,	
and all aspects of the musi	e industry.		
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ment's effective date on the	Department of State's records.		
ecord specifies a delay	red effective date, but not an effec	rtive time at 12:01 a r	n on the earlier
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March 2	2023		
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	Signature of a member or pathorized repres		

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