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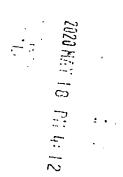
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TO:

Registration Section

Tallahassee, FL 32314

Division of Corporations .
SUBJECT: BRUCE WAYNE ENTERPRISE LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:
BRUCE W THOMAS Name of Person
BRUCE WAYNE ENTECPRISE LLC Firm Company
3726 NW 107 WAY Address
SUNRISE FC. 33351 City State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
BRUCE W THOMAS at (754) 422-3330 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25,00 Filing Fee \$\Bigsquare \text{S30,00 Filing Fee & D \$55 00 Filing Fee & D \$60,00 Filing Fee.} \\ \text{Certificate of Status} \\ \text{Certified Copy (additional copy is enclosed)} \\ Certified Copy (additional copy is
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF 2020 May 18 Pir 4: 12

BRUCE WAYNE ENTERPRISE 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 MARC	H 16, 2020 and assigned
Florida document number <u>L20000082601</u> .	mitted to amend the following: enter the new name of the limited liability company here: inguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC" fices address, if applicable: is MUST BE A STREET ADDRESS) dress, if applicable:	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company." the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		<i></i>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	 ,	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record	s, enter the name of the new registered
Name of New Registered Agent:	·	
New Registered Office Address:		
	Enter Florida str	ves gháress
	('10)	Florida
	Сиу	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 hability 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 = Authorized Member 2020 HAY 18 Pil 4: 12
Type of Action <u>Title</u> Name Address 3726 NW 107 WAY SUNRISE DANG TREAS BELICE N THOMAS II _____ □Remove FROM TREASURER TO MEMBER VICHARGE _ □Add □Remove __ 🗆 Change _ □Add _____ □Change _____ □Add _____ □Remove _____ □Add _____ □Remove _____ _ Change _____ □Add _____ □Remove

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Filing Fee: \$25.00