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COVER LETTER

FO: Registration Se Division of Cor		
Broadwing	g Asset Management LLC	
SUBJECT:	Name of Limited Liability Company	
	of Amendment and fee(s) are submitted for filing.	
Please return all correspo	pondence concerning this matter to the following:	
	Valerie Krieger	
	Name of Person	
	Broadwing Asset Management LLC	
	Firm/Company	- -
	8784 Lewis River Road	
	Address	
	Delray Beach, FL 33446	
	City/State and Zip Code	
	valerieink@aol.com E-mail address: (to be used for future annual report notification)	
For further information (a concerning this matter, please call:	
Valerie Krieger	561 2297222 at ()	
Name	e of Person Area Code Daytime Telephone N	umber
Enclosed is a check for t	the following amount:	•
☐ \$25.00 Filing Fee	Certificate of Status Certified Copy (additional copy is enclosed) Cer	.00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclosed)

TO:

Mailing Address:
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

Broadwing Asset Management LLC		
(<u>Name of the Limited Liability Company as</u> (A Florida Limited Liabili	it now appears on our records.) ly Company)	
The Articles of Organization for this Limited Liability Company were	e filed on July 9, 2020	and assigned
lorida document number 1.2000196792		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		,
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		,
		-
3. If amending the registered agent and/or registered office addre	ess on our records, <u>enter the name</u>	
gent and/or the new registered office address here:		8
		727 (57)
Name of New Registered Agent:		
New Registered Office Address:		(J
	Enter Florida street address	
	, Florida	
(Yes:	Zin Chake

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

Title VL	<u>Name</u>	Address	Type of Action
Title VK Michaele Mich	Bruno Nascimento	8784 Lewis River Road	□ Add
MGR	Heren & Bound	Delray Beach, FL 33445	≡ Remove
VV			□Change
AMBR Astrophent Member	Beth Rothschild	8784 Lewis River Road	= Add
ANT. WEAT	Do don	Delray Beach, FL 33446	₽ Remove
	* Pyen		□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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	•		□Change

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