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<u>,</u>
(Requestor's Name)
(Address)
, ,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL

(Business Entity Name)
(Document Number)
<i certificates="" copies="" of="" p="" status<=""></i>
-d Copies Certificates of Status
:: Instructions to Filing Officer:
, and the second
J. HORNE
JAN 17 2023

Office Use Only



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2023 JAN 17 PH 2:51 SECRETARY OF SHAPE FALLAHASSECTIONS

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COVER LETTER

TO: Registration Se Division of Cor			•
SUBJECT:	37/1/8	ONE In	ternational, CLC
	Name of Limi	ited Liability Company	,
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	_/t/n-	Name of Person	
	- Bat.	Firm/Company	I, terrational
		SJHL MWNO	x ST 1st Flair
	TALA L. Indest.	City/State and Zip Code $\frac{DAH/E C S M}{\text{to be used for future annual report notifity}}$	230/ +//.com
For further information of Name of	roncerning this matter, please concerning the please concerning this matter, please concerning the please conc	at (900) 2/0	Telephone Number
Enclosed is a check for t	he following amount:		
□ \$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 Addre	ss:	Street Address:	

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite \$10 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAttle ONE	INTERNAT	jonal, LLC
(Name of the Limited Liability Compan (A Fiorida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number <u> </u>	were filed on 7-14-5	and assigned
This amendment is submitted to amend the following:		2023 7427 A
A. If amending name, <u>enter the new name of the limited liabi</u>		JAN 1)
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or t	he abbreviation "L'L.C."
Enter new principal offices address, if applicable:	BATTLE GN	a Laterdation
(Principal office address MUST BE A STREET ADDRESS)	113 South M.	<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	II 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>	Name	Address	Type of Action
h <u>anagi</u> ng	Nicola EVEREN	4 1333 LO/A Da	_ 2 766
1Ember		4 1333 LO/A DR TAILA HASSRE, FI 323	□Remove
			Change
			□Add
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			□Change
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			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
F Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.
If the record 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 record is filed.
Dated /-/7-2G23
Signature of a member or authorized representative of a member
Typed or printed name of signee

Filing Fee: \$25.00