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COVER LETTER

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TO: Registration S Division of Co			y .
Brianna Ki	im LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
			(2 2
	Rasheem Edward		2023 APR 17 SECRETALIANA
		Name of Person	R
	Zenbusiness Inc.		in 1
		Firm/Company	7 PH 3
	336 E. College Ave Suite	301	PH 3: 23 CF STATE SSSEE. FL
		Address	ητ; ω
	Tallahassee, FL 32301		
	fulfillment@zenbusiness.co	City/State and Zip Code om to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Zenbusiness Inc c/o Ras	heem Edward	844 4936249	
Name o	of Person	Area Code Daytim	e 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 Addres		Cimon taldares	
Registration S	Section	Street Address: Registration Sec	ction
Division of C	Corporations	Division of Cor	porations
P.O. Box 632		The Centre of T	
Tallahassee, I	rt. 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brianna Kim LLC		
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our record- la Limited Liability Company)	<u>~</u>)
The Articles of Organization for this Limited Liability C	Company were filed on 7/15/2020	and assigned
Torida document number 1.20000204483	<u> </u>	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lim	nited liability company here:	
Bri & Bryce LLC		
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDI	RESS)	
nter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)		PH 3: 23
. If amending the registered agent and/or registere gent and/or the new registered office address here:	ed office address on our records, <u>enter t</u>	the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	:
	Duct Français Street (Marcas	
		rida
	City	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

Change SECULAND SECULAND SECULAND Add Add Remove Change Change Add Add	<u>Title</u>	<u>Name</u>	Address	Type of Action
Change SECULAND SECULAND SECULAND Add Add Remove Change Change Add Add	AMBR	Thomas Bryce Wheeler	116 Bentley Oaks Blvd Auburndale, FL 33823	= Add
SECOND Add AN PR				□Remove
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tive date, if other than the officitive date is listed, the date must If the date inserted in this blo ment's effective date on the De	be specific and cannot be prior to da ck does not meet the applicable	ate of filing or more than 9 statutory filing require	(optional) 0 days after filing.) ments, this date w	Pursuant to 605.0207 vill not be listed as
ord specifies a delayed effective filed.	date, but not an effective time,	at 12:01 a.m. on the ea	rlier of: (b) The	90th day after the
	2023			
1 4/11	 '			
d 4/11 /s/Brianna Whee				

Filing Fee: \$25.00