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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer	
Special instructions to 11	inig Officer.	





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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Ball Coll Name of L	Banenian CCC Limited Liability Company
The enclosed Articles of Amendment and fee(s) are s	
Please return all correspondence concerning this matter	ter to the following:
Sherry	Brubaker Name of Person
Backyo	iva Bahamian CCC Firm/Company
3481 E	Address
Pensacol	City/State and Zip Code
Backyard E-mail addres	Bohemian 1 & gmail Con s: (to be used for future annual reports otification)
For further information concerning this matter, please	e call:
Shevi y Brubaker	at (516) 416 7996 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
S\$\frac{1}{2}\$\$ \$25.00\$ Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 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	Street Address: Registration Section

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 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Com (A Florida Limited	MI CO (()	r records.)
(A Florida Limited	I Liability Company)	
The Articles of Organization for this Limited Liability Compan	by were filed on $8/13$	and assigned
Florida document number (2000247348		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Hall	5	
The new name must be distinguishable and contain the words "Limited Hall	bility Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
(Frincipal office address MOST BL A STREET ADDRESS)		; · · · · · · · · · · · · · · · · · · ·
		
Enter new mailing address, if applicable:		======================================
(Mailing address MAY BE A POST OFFICE BOX)		ン・
B. If amending the registered agent and/or registered office	address on our records	, enter the name of the new registere
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida stree	et addrave
	27101 1 107 444 317 (× 1994, 530
	Cin:	, Florida
	Cit.	zip Coae

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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address		Type of Action
				□Add
				□Remove
				□Change
				□ Add
				□Remove
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ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date if the date inserted in this block does not meet the applicable st iment's effective date on the Department of State's records.	
ford specifies a delayed effective date, but not an effective time, at filed.	12:01 a.m. on the earlier of: (b) The 90th day after th
May 12 2021	
My Buttle Signature of a member or authorized r	1