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COVER LETTER

TO:

P.O. Box 6327

Tallahassee, FL 32314

	Registration Se Division of Cor			
SUBJEC		ITED LIABILITY COMPAN	Y	
SOBJEC	1;	Name of Lim	ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	ondence concerning this matter	to the following:	
		DANIEL A MCNALLY		
			Name of Person	
		BOAB LIMITED LIABILI	TY COMPANY	
			Firm/Company	
		4661 122ND DRIVE N		
			Address	
		WEST PALM BEACH, F	LORIDA 33411	
			City/State and Zip Code	
		JSTAXPROFESSIONAL(=	
			to be used for future annual report notif	leation)
For furthe	r information c	oncerning this matter, please c	all:	
JANET S	SANCHEZ		561 351-8540	
	Name o	f Person		Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$ 25.0	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)
F	Mailing Addres Registration S	Section	Street Address: Registration Sec	
L	Division of C	orporations	Division of Corp	рогацопѕ

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

BOAB LIMITED LIABILITY COMPANY

2077 MAY 31 AM 9: 27

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY LE STATE TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company	were filed on 08/25/2020	and assigned
Florida document number L20000264545		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabs	ility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		_
(Principal office address MUST BE A STREET ADDRESS)		
		
Enter new mailing address, if applicable:		· · ·
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered office	address on our records, enter	the name of the new registered
agent and/or the new registered office address here:	address on var records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	S
	. Fle	orida
	City	orida Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr	ee to act in this capacity. I fu	rther agree to comply with the

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>	<u>Name</u>	Address	Type of Action
AMBR	RYAN A MCNALLY	4661 122ND DRIVE N	□Add
		WEST PALM BEACH, FLORIDA 33411	■ Remove
			□Change
			□Add
			□Remove
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fective date, if other	than the date.	of filing: 04	/22/2022			(optiona	A)	
n effective date is listed, th	e date must be spe	cific and canno	ot be prior to d	ate of filing or	more than 90 da	ivs after fili	ng.) Pursuant	to 605.02
ote: If the date inserted cument's effective date	on the Departm	es not meet the ent of State's	he applicable records.	statutory fil	ing requireme	nts, this da	ate will not b	oe listed a
ecord specifies a delaye is filed.	d effective date,	but not an ef	fective time.	at 12:01 a.m	. on the earlie	r of: (b)	The 90th da	y after th
10 111-11.								
APRIL 28	Λ	202	22					
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Typed or printed name of signee