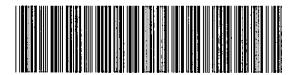
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(Requestor's Name)
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(Business Entity Name)
(Document Number)
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## **COVER LETTER**

Tallahassee, FL 32314

TO:	Registration Sec Division of Corp					
CHDIC	BUWIC LL	c				
SUBJE	Name of Limited Liability Company					
The ene	losed Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Please r	eturn all correspot	ndence concerning this matter	to the following:			
		VANESSA CABRERA				
			Name of Person			
			Firm/Company			
		3564 AVALON PARK E				
			<del> </del>			
		ORLANDO, FL 32828				
		CAbrela V E-mail address: 1	City/State and Zip Code  O	fication)		
For furt	her information ed	oncerning this matter, please c	•	·		
VANE	SSA CABRERA		at (			
	Name of	Person	at ()at () Daytime	c Telephone Number		
Enclose	ed is a check for th	ne following amount:				
<b>≅</b> \$25	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Li \$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 Registration S		Street Address: Registration Se	ction		
	Division of C	orporations	Division of Cor	porations		
Division of Corporations P.O. Box 6327		Division of Cor The Centre of T				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BUWIC LLC		
(Name of the Limited Liability Co	ompany as it now appears on ou nited Liability Company)	ar records.)
The Articles of Organization for this Limited Liability Comp.  Florida document number L20000284824	pany were filed on <u>09/11/20</u>	20 and assigned
This 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 Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES:	<u>S)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	Tice address on our records	s, enter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	
<del></del>	City	, Florida
New Registered Agent's Signature, if changing Registered Ag	•	÷
I hereby accept the appointment as registered agent and	Lauree to act in this capac	ity. I fuether agree to comply with

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
MGR	RAMIRO RIVADERA	1257 OCKLAWAHA DR, ORLANDO,	32828 🗀 Add
			≣Remove
MGR	VANESSA CABRERA	3564 AVALON PARK EAST BLVD	/ <b>=</b> i Add
		3	□Remove
		ORLANDO, FL 32828	□ Change
			🗆 Add
			□Remove
			□Change
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			Remove
			□ Chausa

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
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,	
Note:	tive date, if other than the date of filing: 9/25/2024 (optional)  Tective 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 (3)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
the reco	rd 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 iled.
Dated	09/25/21
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00