LZ0000300578

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COVER LETTER

ro: Registration S Division of Co			, •
	rm LLC amendment to member	s, and change of address	
SUBJECT:	Name of Lim	ited Liability Company	. , , ,
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Thomas Hazlett		
		Name of Person	
	Bullish Firm LLC		
		Firm/Company	
	775 NW Flagler Avenue A	APT 301	
		Address	
	Stuart, Florida 34994		
		City/State and Zip Code	
	thazlett@bullishlle.com		
For further information	concerning this matter, please c	to be used for future annual report notifi all:	cauon)
Thomas Hazlett		954 214-1893	
Name	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for	the 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 tadditional copy is enclosed)

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

Street Address: 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

Bullish Firm LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Jiability Company)	
The Articles of Organization for this Limited Liability Company lorida document number <u>L20000300578</u>	were filed on September 23, 2020	and assigned
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	ility company here:	
ne new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the a	abbreviation B.L.C."
nter new principal offices address, if applicable:	775 NW FLAGLER AVENUE APR 3	20 DE
Principal office address MUST BE A STREET ADDRESS)	STUART, FLORIDA 34994	
		4 7
nter new mailing address, if applicable:	775 NW FLAGLER AVENUE APR 3	
Mailing address MAY BE A POST OFFICE BOX)	STUART, FLORIDA 34994	, o
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	iddress on our records, enter the nar	ne of the new registo
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	
	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 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
AMBR	Logan Hazlett	850 NW FEDERAL HWY, SUITE 112	□Add
		STUART, FL 34994	\equiv Remove
			□Change
_ 			
			Remove
			□Change
			□Add
			🗖 Remove
			□Change
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			□Remove
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			Channa

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Note: If the	ate, if other than the date of filing: 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 e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as effective date on the Department of State's records.
the record spectord is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	November 30 2020.
_	Signature of a member or authorized representative of a member
	signature of a memoer of authorized representative of a memoer
7	Thomas Hazlett

Filing Fee: \$25.00