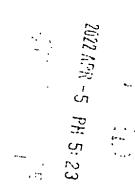
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JUN 0 4 2021

## **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

BWS Acqu	isition, LLC			
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing,		
Please return all correspo	ndence concerning this matter	to the following:		
	David W. Adams, Esq.			
		Name of Person	<del></del>	
	Bennett, Jacobs & Adams,	P.A.		
		Firm/Company		
	Post Office Box 3300			
		Address	<del></del>	
	Tampa, FL 33601			
		City/State and Zip Code	<del></del>	
	dadams@bja-law.com		i Garacia a N	
For further information c	e-mail address: (	to be used for future annual report not	inication)	
	oncerning this matter, prease e			
David W Adams		813 272-1400 at ()	<u></u>	
Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres		Street Address:		
Registration Section		Registration Se		
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BWS Acquisition, LLC

2022 APR -5 PH 5: 23

Company as it now appears on our records.)			
Little Liability Company)			
ompany were filed on November 2, 2020	and assigned		
<u>_</u> -			
ted liability company here:			
ted Liability Company," the designation "LLC" or t	the abbreviation "L.L.C."		
·-·	<del></del>		
ESS)			
office address on our records, enter the	name of the new registe		
omer address on our records, enter the	The state of the s		
New Registered Office Address:  Enter Florida street address			
Florid	Pleade		
	a Zip Code		
S.i.	enp come		
) <u> </u>	Company as it now appears on our records.)  Limited Liability Gompany)  Impany were filed on November 2, 2020  Movember 2, 2020  ESS)  Office address on our records, enter the		

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>	2022 APR -5 PH 5: 23	Type of Action	
			□Add	
			□Remove	
			□Change	
			□Add	
			□Remove	
			□Change	
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			□ Remove	

\_\_\_\_\_ □Change

	2022 APR -5 PH 5: 23	
<del></del>		
<del></del>		
Effective date if other than th	ne date of filing:	
(If an effective date is listed, the date m	oust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 block does not meet the applicable statutory filing requirements, this date will not be listed	0207 (3)(t d as the
the record specifies a delayed effect ford is filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	the
Dated March 27	2021	
1 ./.	1,/	

Typed or printed name of signee