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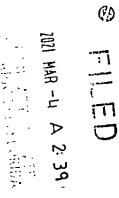
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Biel Vaugh Brane of Limited	Corlett - Roley, LLC Liability Company
The enclosed Articles of Amendment and fee(s) are submitt	ed for filing.
Please return all correspondence concerning this matter to the	ne following:
- Kiel Vaugha	Brian Huilett - Riley Name of Person
Kiel Vaughn	Brian Huilett - Riley , LLC Firm/Company
9701 n new river	Address
Plantation, FL	ity/State and Zip Code a gmail. Com e used for future annual report notification)
E-mail address; (to be	e used for future annual report notification)
For further information concerning this matter, please call:	
Kiel Hailett - Biley Name of Person	at (954) 268 - 9859 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	4 2021
S25.00 Filing Fee S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional 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

The Articles of Organization for this Limited Liability Company were filed on ______ 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 designation "LLC" or the abbreviation "LLC." 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 if 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.

New Registered Agent's Signature, if changing Registered Agent:

City

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

or remov	<u>'ed from our records</u> :	
MGR =	Manager	

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Kiel Hoilett-Kiley	9701 n new river canal	_ SJAdd
		4701 n new river canal road apt 105, plantation,	, □Remove
		FL, 33324	□Change
			□Add
			□Remove
			□Change
			🗆 Add
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			□ Change

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	2021
ective d	ate, if other than the date of filing: (optional) (optional) that is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing:). Pursuant to 605.00
n effective (te: If the	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 605.00 at date inserted in this block does not meet the applicable statutory filing requirements, this date will plot be listed
	effective date on the Department of State's records.
	\sim 2 \sim 2
ecord specis 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 t
is filed.	
ted	7 /23/21
.cu	-160161
_	Signature of a member or authorized representative of a member
	Kiel Vaughn Brigo Huilett Riley
	Typed or printed name of signee