L2 1000591053

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
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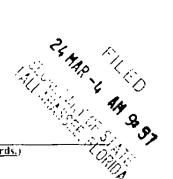
COVER LETTER

TO:

то:	Registration Se Division of Cor				
A1113.14	S.COT.	AL-ALIO I	RADERS LLC		
SUBJI	:C1:	Name of Lim	ited Liability Company		
The en	elosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:		
			NASREEN BARRY		
			Name of Person		
			Firm/Company		
	2651 S COURSE DRIVE UNIT 210				
			Address		
		Pe	OMPANO BEACH FL 33069		
			City/State and Zip Code		
			S.BRIGHT91@YAHOO.COM		
		E-mail address: (to be used for future annual report n	otilication)	
For fur	ther information c	oncerning this matter, please ca	all:		
	MILTON	E. WILSON	754 262-0845		
	Name o	f Person	Area Code Dayt	ime Telephone Number	
Enclos	ed is a check for th	ne following amount:			
□ \$2	5.00 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)	
	Mailing Addres		Street Address: Registration S	Jaction	
Registration Section Division of Corporations			Division of C		
	P.O. Box 632		The Centre of		
	Tallahassee, l	FL 32314	2415 N. Mon	roe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



AL-ALIO TRADERS LLC

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

(A Florida Limited Liability Company)

(A Florida Limited I	Liability Company)	,	076
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	02/03/2021	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company h	ere:	
BARRY CREATIONS LL	С		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company." the o	designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		\$/A	
Principal office address MUST BE A STREET ADDRESS)	N	\$/A	
		\$/A	
Enter new mailing address, if applicable:		N/A	
Mailing address MAY BE A POST OFFICE BOX)		N/A	
		N/A	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our r		me of the new regis
Name of New Registered Agent.	D : 100 All N/A		
New Registered Office Address:		/A rida street address	
	N/A	NIA	
	City	, Florida	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 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>	<u>Address</u>	Type of Action
	N/A	N/A	□Add
			□Remove
			□Change
			□Add
			Remove
			□ Change
			□Add
			□Remove
			□Change
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Remove
			Change

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Effective det	e, if other than the date of filing:N/A(optional)
(If an effective da	ate 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)
	ate inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the feetive date on the Department of State's records.
document ser	receive dute on the peparatient of state a records.
he record specif ord is filed.	ties a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	CEDBUARY 27 2021
Dated	FEBRUARY 27 2024
_	Signature of a member or authorized representative of a member
	NASREEN BARRY

Filing Fee: \$25.00

Typed or printed name of signee