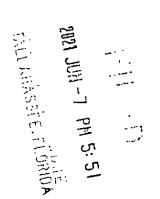
## h21000073996

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300367391723



## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: L3C Booth	es L.L.C.	* ·
	Name of Limited Liability Company  ricles of Amendment and fee(s) are submitted for filing.  I correspondence concerning this matter to the following:    Concerning this matter to the following:   Concerning this matter to the following:   Name of Person   Concerning this matter to the following:   Name of Person   Concerning this matter to the following amount:   Concerning this matter to the	
The enclosed Articles of Amendment and fee(s) are	submitted for filing.	
Please return all correspondence concerning this ma	itter to the following:	
<u> Robi</u>		
136	Brothers L.L.C	
<u>4818</u> 28	9th St NW	
Lehigh	Acres FL 3397	73_
E-mail addre	ess: (to be used for future annual report notificatio	n)
For further information concerning this matter, pleas	se call:	
lan Louis me	at (GOH) GHZ-4-Area Code Daytime Tele	257 phone Number
Enclosed is a check for the following amount:		
	s Certified Copy	Certificate of Status & Certified Copy
Mailing Address:	Street Address:	

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

(3) Brothers	L.L. (	- ·			
(Name of the Limited 1	<u>Liability Company:</u> Florida Limited Liab	as it now appears on our records.  onliny Company)	.)		
The Articles of Organization for this Limited Liability Company were filed on 2/12/21 and assigned Florida document number 2/1000073996.  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 "L.L.C."  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)			ssigned		
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of th	e limited liabilit	y company here:			
· ——					
The new name must be distinguishable and contain the word	s "Limited Liability	Company," the designation "LLC"	or the abbre	eviation "	L.L.C."
Enter new principal offices address, if applicable	e: _	·	<u></u>	2021	
(Principal office address MUST BE A STREET A	<u> 4DDRESS)</u>		<u> </u>	<u>ي</u>	
	-		<u> </u>	<del>-</del>	1 4 4 5 T
Enter new mailing address, if applicable:				PH	• •
	incipal offices address, if applicable:  ice address MUST BE A STREET ADDRESS)  ailing address, if applicable:  ess MAY BE A POST OFFICE BOX)  and the registered agent and/or registered office address on our records, enter the name of the new registered				
			) >	<u>-</u>	<del> </del>
			•	4" 4 3	• . •
B. If amending the registered agent and/or regi		iress on our records, <u>enter t</u>	he name	of the n	ew registered
Name of New Registered Agent:	Jean	Louisme		· · ·	
New Registered Office Address:	10010	Skinner lake Dr Enter Florida street address	Apt	828	
<u>-</u>	Jackson	Skinner lake Dr Enter Florida street address Mk , Flo	rida	3224 Zip Code	<u>6</u>
New Registered Agent's Signature, if changing Reg	istered 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	Kerender Celus	10010 Skinner lake D' Apt	XAdd
		828 Jacksonville PL.	□Remove
		<u>33401.</u>	□ Change
AMBR	Robinson Louisme	4818 28th St NW	
		Lehran Acros, Fl. 33	973 Remove
			Change
AMBR	Kenel Louisne	4818 28th Str Lehigh	XAdd
		4818 28th St. Lehigh. Acres, FL, 33973	Remove
		#41 670 	
<u>-</u>			 ਨਾਂ ਨਾਂ
			□Remove
			□ Change
			🗆 Add
			□Remove
			□Change
		<u> </u>	🗆 Add
			□Remove
			□Change

				-	· <del>-</del>					
		· · · · · · · · · · · · · · · · · · ·				<u></u>				<del></del>
<del></del>										
<del></del>	<u> </u>							<u></u>		
				<u>-</u>		<u>-</u>				
				_						
								ĬĄĬ	202	
					·			Ľ^H	NUL	:
		•		-				5 S S S S S S S S S S S S S S S S S S S	7	
						<u> </u>			7	t / .
				<u>-</u>				— <u>(</u>	رن - <del>زن</del>	·
	<u>_</u> _			_					<u> </u>	
		<u> </u>				<u>-</u>		<u></u>		
	<del></del>									
					 I				<del>-</del>	<del></del>
ective date, if other officetive date is listed	her than the	e date of filis	ng: (	0/10/	21		(0	ntional)		
n effective date is list	ed, the date mu	st be specific ar	nd cannot b	e prior to d	ate of filing	or more tha	n 90 days a	after filing.)	Pursuan	t to 605.020
te: If the date insecument's effective					statutory	ming requ	nements.	this take v	VIII HOU	De fisieu a
cord specifies a de	layed effectiv	ve date, but no	ot an effec	tive time,	at 12:01 a	in. on the	earlier of	f: (b) The	90th <b>d</b> a	ry after the
is filed.			21	22/						
1			., <u>a</u> ç	<u>~</u>						
is filed. tedUne_	<u> </u>	1	., <u>ac</u>			·				

Typed or printed name of signee