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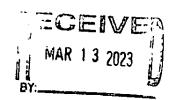
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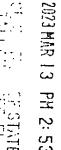
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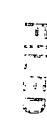


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COVER LETTER

Division of Corporations
UBJECT: BAYVIEW STRATEGIES LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
lease return all correspondence concerning this matter to the following:
Daniel F. Rahill Name of Person Bayview Stategies LLC Firm/Company 7030 Dominica Dr- Address Naples FL. 34113 City/State and Zip Code danvahill & qwail. Com E-mail address: (to be used for fundre amount report notification)
For further information concerning this matter, please call:
E-mail address: (to be used for further annual report notification) E-mail address: (to be used for further annual report notification) E-mail address: (to be used for further annual report notification) Area Code Daytime Telephone Number To S Enclosed is a check for the following amount: Selection of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Enclosed is a check for the following amount:
\$30.00 Filing Fee \$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Street Address: Registration Section

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

Registration Section

TO:

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	PATEGIES L	r records.)		
(Name of the Limited Liability Co (A Florida Lim	nited Liability Company)	,		
The Articles of Organization for this Limited Liability Comp Florida document number <u>L2100091539</u> .	pany were filed on <u>Feb</u> .	21,2021	and ass	igned
This amendment is submitted to amend the following:				J.C."
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 I	Liability Company," the designation	on "LLC" or the abbrev	iation "L.	L.C."
Enter new principal offices address, if applicable:	<u> </u>	675 	20	
(Principal office address MUST BE A STREET ADDRESS	S)	<u> </u>	23	
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			ယ	(** <u>*</u> ***
Enter new mailing address, if applicable:		<u>i</u> ga	9	11
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(Mailing address MAY BE A POST OFFICE BOX)		H	<u> </u>	
				
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records	, <u>enter the name of</u>	the nev	w registered
Name of New Registered Agent:			- 	
New Registered Office Address:				
	Enter Florida stre	et address		
	<u></u>	, 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 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>	Name N' o	Address	Type of Action
MGR	Christine Rahill	7030 Dominica Dr.	Add
,	Ž	Naples, FL 34113	Remove
			Change
MGR	Daniel F. Rahill	7030 Dominica Do	□Adđ
		Naples, FL, 34113	Remove
			Change
AMBR	Christine M. Rahill	7030 Dominica Dr	
		Naples FL 34113	□Remove
			Change
AMBR	Janiel Flahill	7030 Dominica Dr	□Add
		Naples, FL 34113	Remove
			Change
			□Add
			Remove
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		हिंद हार गाउ	PAdd 7
			Si Remove
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ective date, if other the	an the date of filir	ng:		(opti	onal)	
n effective date is listed, the determined in	this block does not	meet the applicabl	tate of filing or more e statutory filing	e than 90 days are requirements, th	s date will	not be listed
cument's effective date or	the Department of	State's records.				
ecord specifies a delayed of	effective date, but no	ot an effective time	, at 12:01 a.m. or	the earlier of: (o) The 90	th day after th
is filed.						
ted March	1	. 2023	11.	,)		
(C)			// / / ,			
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Filing Fee: \$25.00