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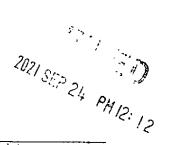
Division of Cor		
Bull Run C	Capital, LLC	
	Name of Limited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are submitted for filing.	
Please return all correspo	condence concerning this matter to the following:	
	Thomas O. Wells, Esq.	
	Name of Person	
	Wells & Wells, P.A.	
	Firm/Company	
	901 Ponce de Leon Blvd., Suite 200	
	Address	
	Coral Gables, FL 33134	
	City/State and Zip Code	
	mechelle@twellslaw.com E-mail address: (to be used for future annual report notification)	
For further information c	concerning this matter, please call:	
Thomas O. Wells, Esq.	305 444-0016	
Name o	of Person Area Code Daytime Telephone N	umber
Enclosed is a check for the	the following amount:	
■ \$25.00 Filing Fee	Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) Certified Copy	00 Filing Fee, rtificate of Status & rtified Copy ditional 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



Bull Run Capital, LLC

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

The Articles of Organization for this Limited Liability Company Florida document number <u>L21000156981</u>	were filed on $\frac{04/14/2021}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	13351 Luray Road
(Principal office address MUST BE A STREET ADDRESS)	Southwest Ranches, FL 33330
Enter new mailing address, if applicable:	13351 Luray Road
(Mailing address MAY BE A POST OFFICE BOX)	Suthwest Ranches, FL 33330
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida su eet address
	Planta
	City Zip Code

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
MGR	Thomas O. Wells	901 Ponce de Leon Blvd., Suite 200	□∧dd
		Coral Gables, FL 33134	≅Remove
			□Change
MGR	Gerardo Necuze	13351 Luray Road	≅ Add
		Southwest Ranches, FL 33330	□Remove
			ElChange
MGR Marcia Necuze	Marcia Necuze	13351 Luray Road	
		Suothwest Ranches, FL 33330	□Remove
		 	□Change
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Typed or printed name of signee