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COVER LETTER

TO: Registration Se Division of Cor				
BALLEN I	ENTERPRISE INVESTMENT	'S LLC		
SUBJECT:Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filling		
	ondence concerning this matter	_		
rease return air correspo	ondence concerning this matter	to the following:		
	LOVETTE DOBSON			
		Name of Person		
	INCFILE.COM LLC			
		Firm/Company		
	17350 STATE HWY 249	STE 220		
		Address		
	HOUSTON, TX 77064			
	USU SARA CINICIPILIS (10)	City/State and Zip Code		
	E-mail address: (M to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:	·	
LOVETTE DOBSON		888 462-3453		
Name o	f Person		ne Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, 1	Section orporations 7	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	rporations Fallahassee e Street, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

BALLEN ENTERPRISE INVESTMENTS LL21 JUN 21 PM 1: 12

(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 were filed on 04/14/2021 Florida document number 1.21000173884 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida City

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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being aor removed from our records</u>:

MGR = N $AMBR = A$	lanager Authorized Member	ANTSON OF CONTRACTOR	
<u>Title</u>	<u>Name</u>	Address 21 JUH 21 PH 1: 12	Type of Action
AMBR	Sean McKenna	507 Nw 39th Rd Apt 161	= Add
		Gainesville, FL 32607	□Remove
			□Change
		 	
			□Remove
			□ Change
			□Remove
			□Change
			□Add
		 	Remove
			Change
	 		
			□Remove
			□Change
			□Add
			□Remove

D. II amending any other mioring	ation, enter change(s) here: (Attach additional sheets, if necessary.)
	21 JUN 21 PH 1: 12
E. Effective date, if other than the (If an effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the I	e date of filing:
If the record specifies a delayed effecti record is filed.	ve date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
June 10	2021
Brock o	Allen Signature of a member or authorized representative of a member
Brook Allen	Signature of a member of authorized representative of a member

Typed or printed name of signee