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TO:				
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SUBJE	CT:	Name of Lin	ited Liability Company	
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rieasc	return an correspo	indence concerning inis matter	to the tranowing.	
			Natalie Peterson	
Division of Cerporations The Back Yrd Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Nattalie Peterson Name of Person Florida Biz Filing, LEC Firm/Company 3033 Gillespie Ave Address Sarasota, FL 34234 City/State and Zip Code FloridaBiz/Filing@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Victor Name of Person Name of Person S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed)				
		The Back Yrd Name of Limited Liability Company mendment and fee(s) are submitted for filing. January State Peterson Name of Person Florida Biz Filing. LLC Firm/Company 3033 Gillespie Ave Address Sarasota, FL 34234 City/State and Zip Code FloridaBiz/Filing@gmail.com E-mail address: (to be used for future annual report notification) accerning this matter, please call: or 256-5465 Area Code Daytime Telephone Number following amount: □ \$30.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) GG ADDRESS: STREET/COURIER ADDRESS: for Section Section		
			Firm/Company	
			3033 Gillespie Ave	
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			The Back Yrd Name of Limited Liability Company Innent and fee(s) are submitted for filing. concerning this matter to the following: Natalic Peterson Name of Person Florida Biz Filing, LLC Firm/Company 3033 Gillespie Ave Address Sarasota, FL 34234 City/State and Zip Code FloridaBizFiling@gmail.com E-mail address: (to be used for future annual report notification) ing this matter, please call: 1 941	
		Florida Biz Filing, LLC Firm/Company 3033 Gillespie Ave Address Sarasota, FL 34234 City/State and Zip Code FloridaBizFiling@gmail.com E-mail address: (to be used for future annual report notification) ormation concerning this matter, please call:		
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For fur	ther information c			Ancadony
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			Natalic Peterson Name of Person Florida Biz Filing. LLC Firm/Company 3033 Gillespie Ave Address Sarasota, FL 34234 City/State and Zip Code FloridaBiz/Filing@gmail.com E-mail address: (to be used for future annual report notification) ming this matter, please call: 941 256-5465 at (
	Name o	f Person	Area Code Dayti	ime Telephone Number
Enclose	ed is a check for th	e following amount:		
■ \$25	5.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	Registr	ING ADDRESS: ation Section n of Corporations	Registration Sec	tion

P.O. Box 6327 Tallahassee, FL 32314

TO:

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PEACOCK'S LUXURIE'S LLC		
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liability Company were filed on _ Florida document numberL21000216287	05/10/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company	<u>here</u> :	
The Back Yrd, LLC		
The new name must be distinguishable and contain the words "Limited Liability Company," the	:[7]	iagign "L.L.C."
Enter new principal offices address, if applicable:	20 20 20	(() (=)
(Principal office address MUST BE A STREET ADDRESS)		년 - 122 - 122
	(5) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	
	The state of the s	
Enter new mailing address, if applicable:	process 1 to 1	దా
(Mailing address MAY BE A POST OFFICE BOX)	115	വ ——————
B. If amending the registered agent and/or registered office address of registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	on our records, enter the	name of the
	Enter Florida street address	
	, 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 provisions of all statutes relative to the proper and complete performance accept the obligations of my position as registered agent as provided for in	of my duties, and I am fami	liar with and

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 adde or removed from our records:

MGR =	Manager
AMBR =	Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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(If an effect Note: If		ic and cannot be prior to date of filing or mo not meet the applicable statutory filing		
the recor The 9	rd specifies a delayed effectiv Oth day after the record is fil	ve date, but not an effective ti led.	ime, at 12:01 a.m. on the	e earlier
Dated	Natalie Peterson	08/29/201		
		Natalie Petersou		
	Signature	of a member or authorized representative of	of a member	
	-	·		
	·	Natalie Peterson		