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SECRETARY OF STATE
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C KILLS,

COVER LETTER

TO:

Registration Section Division of Corporations

Mailing Address:

P.O. Box 6327

Registration Section

Division of Corporations

Tallahassee, FL 32314

BRAVO KALLY, ELC SUBJECT: _ 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: Walter J. Palamarchuk Name of Person Firm/Company 980 Worthington Address Birmingham, MI 48009 City/State and Zip Code waliypaimar@cs.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

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

BRAVO KALLY.	LLC				
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears or Company)	our records.)			
The Articles of Organization for this Limited Liability Company were f	iled on	June 22, 2021	and a	_ and assigned	
Torida document numberL21000288009					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liability co	mpany here:				
he new name must be distinguishable and contain the words "Limited Liability Com	pany," the desig	nation "LLC" or the a		L.L.C.	
Enter new principal offices address, if applicable:	. <u>.</u>		2021		
Principal office address MUST BE A STREET ADDRESS)		۱۳۰۰ ۱۳۰۰ ج ز ۱۳۰۰			
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Enter new mailing address, if applicable:		رد	S 0		
Mailing address MAY BE A POST OFFICE BOX)			<u> 19</u>		
3. If amending the registered agent and/or registered office address gent and/or the new registered office address here:	s on our reco	rds, <u>enter the na</u> r	me of the n	ew regis	
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida	street address			
		, Florida _			
Cit	١.		Zip Code	ę,	

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>	<u>Name</u>	Address	Type of Action
AMBR	Walter J. Palamarchuk	980 Worthington, Birmingham, MI 48009	□Add
			≣Remove
			IChange
AMBR	Wolodymyr J. Palamarchuk	980 Worthington, Birmingham, M1 48009	= Add
			□Remove
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cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day af s filed.	ier the
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Signafure of a member or authorized representative of a member	
Wolodymyr J. Palamarchuk	