121000296693

(Rec	juestor's Name)	
(Add	ress)	
(Add	Iress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



300368848793

RECEIVED
JUL 0 6 2021

FILED
2021 AUG 25 PH 12: 1.



COVER LETTER

TO: Registration Section Division of Corpo			
SUBJECT: BC	ian Suga Name of Jimit	rmcen thoto	graphy
The enclosed Articles of Ar	mendment and fec(s) are subn	nitted for filing.	
Please return all correspond	lence concerning this matter to	o the following:	
	Tamer	a Sparkman Name of Person	
	- Brian	Suzerman Photo Firm/Company	5 raphy
		SL Ave.	
	Poconut	City/State and Zip Code	3073
	Tamera Sf E-mail address: (1)	OCKMON @9 M C	til. com
For further information con-	cerning this matter, please cal		
Jameva Name of Pa	Sparkinan erstn	at (757) 234. Area Code Daytime	2436 Telephone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:		Street Address:	
Registration Sec		Registration Section	
Division of Cor P.O. Box 6327	porations	Division of Corpo	
Tallahassee, FL	32314	The Centre of Tail 2415 N. Monroe	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

7

Name of the Limited Liability Compan (A Florida Simited L.)	y as it now appears on our records) ability Company)
The Articles of Organization for this Limited Liability Company y Florida document number	vere filed on $((3, 2))$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	by Company," the designation "LLC" or the abbreviation "L.J. C"
Enter new principal offices address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	25 PH 2: 17
B. If amending the registered agent and/or registered office as agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p	• • • • • • • • • • • • • • • • • • • •

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	Tamera Szarkman		□ Add
			_ □Remove
		Change to AMBR	_ Change
MGR	Brian Syerman		🗆 Add
			□Remove
	7	Charge to "AHBR"	_ EChange
			□Add
			□Remove
			Change
		yn -	202 Add F F F F F F F F F F
			_ ⊡ G hange
			_
			□Remove
			_ □Add
			_ □Remove
			_ □Change

						·			
-									
				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·				
									
								<u>_</u>	
	<u>,,</u>				<u> </u>				
	, ,		λ.	··	-	·.	7 58	2021	
	·							S SON	
)) ()	25 - P	
•				_			인공 -	말 공	
							二台	1,7	
	_ _					_			
		<u> </u>							
an effecti <u>ote:</u> If t	ve date is listed, the he date inserted	han the date of the date of the date must be specified in this block does on the Department	ic and cunnot be pro not meet the app	licable statutory ti	r more than 90 da	(option ys after fil ns, this d	ling.) Pursua	nt to 605. t be liste	.01 .d
ecord spis filed	occifies a delayed	I effective date, bu	t not an effective	time, at 12:01 a r	n on the earlie	rof (b)	The 90th c	day after	ı th
	7	- 1 .	702	21,.					
ited			1 1	// /					
ited		Signature	JPU/1	thorized representat					

Filing Fee: \$25.00