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SECRETARY OF STAT

BE Different, LLC .45 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: Brandon Smith Name of Person Firm/Company 4425 Sharon Road, Apt MPH12 Address Charlotte, NC 28211 City/State and Zip Code Bighitter06@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Brandon Smith** Name of Person Daytime Telephone Number 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 & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

or removed from our records.

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Maurice Smith	3901 Waldrop Church Rd	
		Louisa, VA 23093	■ Remove
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<u>e:</u> If the date	if other than the date of filing is listed, the date must be specific as inserted in this block does not extive date on the Department of	meet the applicable	te of filing or more th statutory filing req	(optional) an 90 days after filing.) uirements, this date w	Pursuant to 605.020 vill not be listed a
ord specifies filed.	a delayed effective date, but no	ot an effective time, a	at 12:01 a.m. on the	e earlier of: (b) The	90th day after th
:d	November 3	2022			
		PS S	И		
	Signature of	a member or authorized	representative of a r	nember	
		Brandon Sn			