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## **COVER LETTER**

	legistration Secti Division of Corpo					
	BN SERVICE	ES LLC				
SUBJEC	I; <u></u>	Name of Limi	ted Liability Company			
The enclo	sed Articles of Ar	mendment and fee(s) are sub-	nitted for filing.			
Please reti	arn all correspond	lence concerning this matter	to the following:			
		Bryan figueroa				
			Name of Person			
			Firm/Company			
		10818 fairfield village driv	e			
			Address			
		Tampa, fl 33624				
			City/State and Zip Code			
		Bnservicesa l@gmail.com E-mail address: (t	o be used for future annual report notific	ation)		
For furthe	r information con	cerning this matter, please ca			Ć	
Bryan Fig			813 8137354824 at ()			
	Name of P	erson	Area Code Daytime	Telephone Number	·····································	
Enclosed	is a check for the	following amount:				
□ <b>\$</b> 25.0	0 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing I Certificate of Certified Copy (additional copy is	Status &	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BN SERVICES LLC	
(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 07/09/2021	and assigned
Florida document number L21000314147	
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	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:	·~
(Principal office address MUST BE A STREET ADDRESS)	
Patro and district the Control of th	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
<del> </del>	<u> </u>
B. If amending the registered agent and/or registered office address on our records, enter the r	same of the new registered
agent and/or the new registered office address here:	lame of the new registerer
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	<b>H 7</b>
F.nter Florida street address	<del></del>
, 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 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, 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 Nicolas David Vargas 10818 fairfield village drive tampa flori		10818 fairfield village drive tampa florida 33624	<b>\leftit{\leftit{Add}}</b>
			□Remove
			□Change
AMBR	Bryan Figueroa	10818 fairfield village drive tampa florida 33624	□Add
			Remove
			Change
			DAdd CD
			Remove
<del></del>	<del></del>		
			airfield village drive tampa florida 33624  □Remove □Change airfield village drive tampa florida 33624 □Add □Remove □Change □Add
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cord specifies a delayed effective date, but not an effective time, at 12:01 a s filed.	i.m. on the earlier of: (b) The 90th day after	the
07/14 2021		
In Vz		

Filing Fee: \$25.00