K21000342760

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(2,,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





500371317575

2021 AVS 32 PH 3: 05

ahlaid



August 26, 2021

TYDRE JOWAN CLARK SR. 334 OLEANDER WAY CASSLEBERRY, FL 32707

SUBJECT: BROS APPLIANCES LLC

Ref. Number: L21000342760

We have received your document for BROS APPLIANCES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 121A00020529

Alecia Rivers Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BrosAppliances LLC		TO THE POPULATION OF THE POPUL	edi. V
(Name of the Limite	ed Liability Company A Florida Limited Liab	as it now appears on our recondity Company)	<u>(1).</u> /
The Articles of Organization for this Limited Li			
The Articles of Organization for this Entirect En			
Florida document number 1.21000342760			
This amendment is submitted to amend the follo			
A. If amending name, enter the new name of			
BrosAppliances LLC		a " dear legionation "I	(C" or the abbreviation "L.L.C."
Bros Appliances LLC The new name must be distinguishable and contain the w	ords "Limited Liability	Company, the designation is	100
Enter new principal offices address, if applic			
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BON)		
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office ac ess here:	ldress on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:	Tydre Jowan Cla	irk Sr	1D
 -	6420 N Orange l	Blossom Trail 32810	<u> </u>
New Registered Office Address:		Enter Florida street ad	$\sim \sim \sim$
	orlando		Florida 328:00 C
	_	City	i zip Coac

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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

f amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added r removed from our records:

IGR = Manager MBR = Authorized Member

itle	<u>Name</u>	Address	Type of Action
1GR	Tydre Jowan Clark SR	6420 N orange blossom trail 32810	≘ Add
			Remove
			□ Change
			□ Add
			□Remove
		<u> </u>	☐Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			☐ Add
			□Remove

	The first section of the section of
.,	
· 	
Effective dute, if other th	
 Note: If the date inserted ir 	tale must be specific and cumot be prior to due of range of must plan to be specific and cumot be listed as to this block does not meet the applicable statutory filing requirements, this date will not be listed as to the Department of State's records.
	effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	effective date, but not an effective time, at 12:01 a.m. on the earner of (0).
he record specifies a delayed ord is filed.	
ord is filed.	1:06pm
ord is filed.	
ord is filed.	
ord is filed.	1:06pm

Filing Fee: \$25.00