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2022 MAR -4 PM 2: 49
SECRETARY OF STATE

A. BUTLER MAR 14 2022

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Bricking The Gap UC 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:
Typhonda Grant Name of Person
Brilling The Gap IIC
39531 Cumpar Rd
Bri Wings Was Pamail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tyhinda Grant at (813) 507-6374 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee \& Certificate of Status \$\Bigcup \\$60.00 Filing Fee \& Certificate of Status \$\Bigcup \\$60.00 Filing Fee \& Certificate of Status \& Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

FILED

Bricking The Gar	o UC		2022 MAR -4	PH 2: 1. a
(Name of the Limited Liability Co (A Florida Lim	ompany as it now a nited Liability Comr	appears on our	records.)	• •
(**************************************			SECRETARY	OFSTATE
The Articles of Organization for this Limited Liability Comp	pany were filed c	3n 8 9	2 2 2 2 3	OF STATE SSEE, FI and assigned
Florida document number <u>L2100035169169</u> .		• ,		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability compa	ny here:		
The new name must be distinguishable and contain the words "Limited l	Liability Company.	" the designation	on "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS	<u>s)</u>			
	<u></u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				

	·			
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	lice address on (our records,	, enter the name	of the new registered
Name of New Registered Agent:				
New Registered Office Address:				
	Ente	er Florida stree	t address	
			Florida	Zip Code
	City			гір Соав
New Registered Agent's Signature, if changing Registered Ag				
I hereby accept the appointment as registered agent and	lagree to act in	this capacii	iy. I further agr	ee to comply with the

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	Tray Germaine Grant	38531 Cummer Rd	XAdd
	,	38531 Cummer Rd Dade city, F1 33523	□Remove
			□Change
			🗀 Add
			□Remove
			□Change
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			[]Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional) (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated _