L21000373507

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SECRETARY OF STATE
FALL AHASSET FISHER

2/04/303/H

COVER LETTER

TO: Registration Section Division of Corpora	
SUBJECT: SF	3.05
SUBJECT: 21	Name of Limited Liability Company
The enclosed Articles of Amo	endment and fee(s) are submitted for filing.
Please return all corresponder	nce concerning this matter to the following:
-	Bradley Forch
	J Name of Person
-	BF Bins Firm/Company
	, ·
-	8574 100th C.T
	Address
-	Vero Beach Fe 32967 City/State and Zip Code
_	Ford brad 810 (a hoo · Com E-mail address: (To be used for future annual report notification)
For further information conce	rning this matter, please call:
Bradley Fre	177
Name of Pers	at (172) (633-0253) Area Code Daytime Telephone Number
Enclosed is a check for the fol	lowing amount:
S≥ \$25,00 Filing Fee □	S\$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address:	Street Address:
Registration Secti Division of Corpo	$oldsymbol{arphi}$
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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RF BIOS		2021 AUG 26 PM 8: 03
(Name of the Limited	Liability Company as it now appears on our records Florida Limited Liability Company)	D SECRETARY OF STAIL TALL AHASSEE, FIRM
The Articles of Organization for this Limited Liab Florida document numbe. 21 0003735 0	oility Company were filed on 811921	and assigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the		
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ele:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BE	<u></u>	
		
B. If amending the registered agent and/or regagent and/or the new registered office address		he name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Flo	rida 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 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
<u>Manager</u>	Bradley Ford	8574 100 th CT Vero Beach	F 32967
			□Remove
			□Change
			□Add
			□Remove
		<u> </u>	□Change
			□Add
			□Remove
			□Change
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			□Change
			□Add
			□Remove
			GChange
	<u> </u>		□Add
			□Remove
			□Chance

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe <u>Note:</u>	we date, if other than the date of filing:
If the record record is file	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 ed.
Dated_	8 23 21
	Signature of a member or authorized representative of a member
	Brackita 1816