L21000373822

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COVER LETTER

Division of Co	rporations	1
The Bargai	in Lot, LLC	
SUBJECT:	Name of Limited Liability Company	21
The enclosed Articles of	Amendment and fee(s) are submitted for filing.)23 CCT
Please return all correspo	ondence concerning this matter to the following:	<u>.</u>
	Fred VanBuren	:01 17.7
	Name of Person	2023 CCT 13 AH 10: 21
	The Bargain Lot, LLC	
	Firm/Company	2023 CCT 13 AH 10: 21
	2448 Highway 71	
	Address	
	Marianna, FL 32448	
	City/State and Zip Code	
	bigb_thatsme01@yahoo.com E-mail address: (to be used for future annual report notification)	
For further information of	concerning this matter, please call:	
Fred VanBuren	850 557-3295 at ()	
Name o	of Person Area Code Daytime Telephone Number	
Enclosed is a check for t	the following amount:	
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee Certificate of Status	tatus &

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

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The Bargain Lot, LLC		 3
(Name of the Limite	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	9 2 <u>-</u>
The Articles of Organization for this Limited Lin Florida document number L21000373822	ability Company were filed on 08-20-2021	and assigned
This amendment is submitted to amend the follo		
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applica		
(Principal office address MUST BE A STREE)	T ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE I	<u></u>	<u></u>
B. If amending the registered agent and/or reagent and/or the new registered office addres	egistered office address on our records, <u>enter the</u> <u>s here</u> :	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	da
	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 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
MGR	Daryl Ray Branning	1742 Hawaii Street, Alford, FL 32460	≅Add
			□Remove
			Change
			2027 CAdd
			Change
			<u>~</u> □Add
			□Remove
			□Change
			□Add
			Remove
			□Change
		 	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

N/A	
	202
	2023 CST
	
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ctive date, if other than the date of filing:	(optional) rior to date of filing or more than 90 days after filing.) Pursuant to 605.0
effective date is listed, the date must be specific and cannot be pr	rior to date of filing or more than 90 days after filing.) Pursuant to 605.0
ment's effective date on the Department of State's recor	plicable statutory filing requirements, this date will not be listed rds.
ord specifies a delayed effective date, but not an effective filed.	re time, at 12:01 a.m. on the earlier of: (b) The 90th day after
2022	
d October 10.	<u></u>
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Signature of a member or a	uthorized representative of a member

Filing Fee: \$25.00