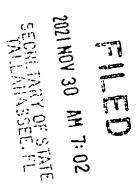
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COVER LETTER

TO;	Registration Se Division of Cor				
er (BFB ASSC	OCIATES LLC			
St nar.	(I;	Spine of Lin	ited Liabdity Company		
The encl	losed Articles of	Amendment and feets) are sub	omitted for filling.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		TALITA BENDILATTI			
			Name of Person		
		CONNECTION CONSUL	JTING LEE		
	Firm/Company 7450 DR PHIELIPS BLVD, STE 303				
	Address				
		ORLANDO, FL 32819			
			City/State and Zip Code		
		CONTACT@ CONNECTIO			
			to be used for future annual report notification)		
For fartl	her information c	oncerning this matter, please c	all:		
TALIT	A BENDILATTI		407 704-4929		
Name of Person			at ()		
Enclosed	d is a check for th	ne following amount:			
≡ \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section			Street Address: Registration Section		
	Division of C	orporations	Division of Corporations		
	P.O. Box 632 Tallahassee, I		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO FIFD ARTICLES OF ORGANIZATION **OF** 2021 NOV 30 AM 7: 02

BFB ASSOCIATES LLC

TES LLC

SECRETARY OF STATE

(Name of the Limited Liability Company as it now appears on surfreeords). FU

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liabilit Florida document number 1.21000385499	ty Company were filed on <u>08/27/2021</u>	and assigned
This amendment is submitted to amend the following	ğ.	
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 designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AL	DDRESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	4	
B. If amending the registered agent and/or registe agent and/or the new registered office address her	ered office address on our records, r <u>e</u> :	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
<u> </u>		Florida
Nan Bankaanal Came Clause and Colored		Zip Code
New Registered Agent's Signature, if changing Regist		
I hereby accept the appointment as registered ago provisions of all statutes relative to the proper an accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	d complete performance of my dut d agent as provided for in Chapter tered office address. I hereby confi	ies, and I am familiar with and 605, F.S. Or, if this document is

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>	<u>Address</u>	Type of Action
MGR	W & S INVESTMENTS LLC	3813 MOUNT VERNON WAY	[]]Add
		KISSIMMEE, FL 34741	■Remove
			Change
AMBR	S & W INVESTMENT GROUP LLC	3813 MOUNT VERNON WAY	bbA≣
		KISSIMMEE, FL 34741	□Remove
			□Change
			🗀 Add
			□Remove
			Change
			🗀 Add
			□Remove
			Change
			□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□
			DRemove
			Change
			CJAdd
			□Remove
			□Change

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Effecti	ve date, if other than the date of filing:
f an effe Note:	ective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	ent's effective date on the Department of State's records.
e record rd is filo	I 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.
	NOVEMBER 29th 2021
Dated_	
Dated_	
Dated_	Signature of a member of authorized representative of a member