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Y. SCOTT OCT 31 ZUZI

COVER LETTER

TO: Registration S Division of Con						
NOTAS, L	LC					
SUBJECT:	Name of Lir	nited Liability Company	·······			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Richard Anderson		29			
		Name of Person				
	NOTAS, LLC		DST TOO			
		Furn/Company	: 0			
	17150 Ravens Roost, #7		2021 OCT 18 PH 3: 07			
	-	Address				
	Fort Myers, Florida 33908	3				
		City/State and Zip Code				
	richardkanderson@gmail.c	COTT.				
	E-mail address:	(to be used for future annual report not	fication)			
For further information of	concerning this matter, please o	call:				
Richard Anderson		917 557-0187				
Name o	of Person	Area Code Daytim	e Telephone Number			
Enclosed is a check for t	he following amount:					
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Addres		Street Address:				
Registration !		Registration Sec Division of Cor				
Division of Corporations P.O. Box 6327		The Centre of T	•			
Tallahassee,		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NOTAS, LLC			
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our reco Liability Company)	rds,)	-
	09/10/2021		
e Articles of Organization for this Limited Liability Company	were filed on	and a	ssigned
orida document number L21000403271			
is amendment is submitted to amend the following:			
If amending name, enter the new name of the limited liab	bility company here:		
ubble Babble, LLC			
e new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LL	.C" or the abbreviation "	LLC."
nter new principal offices address, if applicable:	*		
rincipal office address MUST BE A STREET ADDRESS		, 6)
			3
		- F-3 G	11
			1 PARTS
ter new mailing address, if applicable:		<u></u> α) j
ailing address MAY BE A POST OFFICE BOX)		(3.5) I	
utting titutess MAT BE A FOST OFFICE BOX		170 Z	7 7
		<u> </u>	,
			1
If amending the registered agent and/or registered office	address on our records, <u>ente</u>	er the name of the n	ew register
ent and/or the new registered office address here:			
Name of New Registered Agent:			
rano or new registered regent.			
New Registered Office Address:			
	Emer Florida street outst	SZZ.	
		ibrid.	
	City	Zip Cod	le

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 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 **Address Type of Action** Name Title □Add __ □Remove _____ Change __ □Add _ Remove □ Change E TALE Change _____ 🗀 Add _____ □Remove _____ Change □Add □ Change \square Add Remove

Page 2 of 3

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Tective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be p	wice to date o	of filing or more	(op than 90 days at	etional) Ter filine.) Purs	nant to 605	020
ote: If the date inserted in this block does not meet the approximent's effective date on the Department of State's reco	plicable str	tutory filing n	equirements.	his date will	not be list	ed a
Sellicit 3 checave date on the requirement of thate 3 reco	itus.					
e record specifies a delayed effective date, but	t not an e	effective tim	e, at 12:0	1 a.m. on t	he earli	er i
The 90th day after the record is filed.						
October 11th 2021						
ated October 11th 2021)					
ated October 11th 2021	<u> </u>					
October 11th 2021 Signature of a member or a	authorized re	epresentative of	a member			

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Filing Fee: \$25.00