## Floring Department of State 529 Division of Corporations Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210004353353)))



H210004353353ABC+

			2821 NOV 29
To:	Division of Corporations		VO
	Fax Number : (850)617-6383		29
From:			AM 10: 17
	Account Name : REGISTERED AGE Account Number : I20090000081	NTS INC.	<u> </u>
	Phone : (307)200-2803		<del>"</del>
	Fax Number : (855)330-1010		7
ar	nnual report mailings. Enter only mail Address: LLC AMND/RESTATE/CORRE		se.**
ar	nnual report mailings. Enter only mail Address:  LLC AMND/RESTATE/CORRE BEACH BUY	one email address plea CT OR M/MG RESIC	se.**
ar	LLC AMND/RESTATE/CORRE BEACH BUY	CT OR M/MG RESIC	se.**  GN
ar	LLC AMND/RESTATE/CORRE BEACH BUY  Certificate of Status  Certified Copy	one email address plea CT OR M/MG RESIC	se.**
ar	LLC AMND/RESTATE/CORRE BEACH BUY  Certificate of Status  Certified Copy  Page Count	CT OR M/MG RESICE O O O O O O O O O O O O O O O O O O O	se.**  GN
ar En	LLC AMND/RESTATE/CORRE BEACH BUY  Certificate of Status  Certified Copy	CT OR M/MG RESIC	NOV 3 0 20
ar En	LLC AMND/RESTATE/CORRE BEACH BUY  Certificate of Status  Certified Copy  Page Count	CT OR M/MG RESICE O O O O O O O O O O O O O O O O O O O	NOV 3 0 20
ar	LLC AMND/RESTATE/CORRE BEACH BUY  Certificate of Status  Certified Copy  Page Count	CT OR M/MG RESICE O O O O O O O O O O O O O O O O O O O	NOV 3 0 20

1=

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

beach buys llc		<b>8</b> 양자 이번
(Name of the Limited	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number L21000500529	oility Company were filed on 11/22/21	and assimed 17
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
My Beach Buys LLC		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	<del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
	AP-100-100-100-100-100-100-100-100-100-10	
B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office address on our records, <u>enter the name o</u> <u>here</u> :	of the new registered
Name of New Registered Agent:	Line Control C	
New Registered Office Address:	Enter Florida street address	
	Pla-Ma	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Re	egistered 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>	Name	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			Remove
			Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change

_	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
_			
-			
_			
_		202	14H c
_		2021 NOV 29	SION I
_		29	3. CO
		AM 10:	第98.5 18.8 18.8 18.8 18.8 18.8 18.8 18.8 1
-		<u>ب</u>	200 m
-			
-		-	
_		-	
_		-	
-		-	
_		-	
Note:	ive date, if other than the date of filing:  [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 60:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list lent's effective date on the Department of State's records.	5.020' ted as	7 (3)(b the
the recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after led.	r the	
Dated	November 29 2021		
	Signature of a member or authorized representative of a member		
	Riley Park		
	Typed or printed name of signee		

Filing Fee: \$25.00