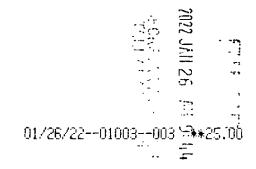
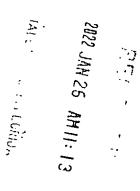


(Re	equestor's Name)
(Ad	ddress)
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PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to Fil	ling Officer:

Office Use Only







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	CERTIFIED COPY	<u> </u>
XX	РНОТОСОРУ	
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_	ROSE BUNCH LLC (CORPORATE NAME AND DOCUME	NT #)
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PECIAL ISTRUC	CTIONS:	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROSE BUNCH LLC			
(Name of the Limited Liability (A Florida	ty Commany as It now appears on our records.) a Limited Liability Company)		
The Articles of Organization for this Limited Liability C	Company were filed on 01/24/2022	and as	ssigned
Florida document number L22000025089	 '		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or	r the abbreviation "	L.L.C."
Enter new principal offices address, if applicable:		30] 7
(Principal office address MUST BE A STREET ADD)	RESS)	2022 JAN 24 AN 9: 44 2072 JAN 24 AN 9: 44	
		Г	<u></u>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
INCHINE CONTESS TENT DE ALONE ON TALLE DOIL			Ė
			-
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>enter th</u>	e name of the n	ew <u>registere</u>
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	174	la.	
	, Flori 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

Title	<u> Nаше</u>	Address	Type of Action
AMBR	BRITTON MACKENZIE ROSE	200 Suydam Lane	□Add
		Bayport, NY 11705	□Remove
			Change 2022
AMBR	RACHEL ROSE	200 Suydam Lane	DAM T
		Bayport, NY 11705	□ Remove
			⊞ Change
			П Remo ve
			Change
			□Add
			□ Remove
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			Change
			□ Add
			□Remove
			□Change

fective date, if other than the date of filing: (optional) n effective 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 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a cument's effective date on the Department of State's records.	ective date, if other than the date of filing:	ecord specifies a delayed effective is filed.			on the earlier of: (b)	The 90t	h day after the
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