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Office Use Only



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22 FF3 -7 F3 4: 33

T. MATTHEWS FEB 16 2022

COVER LETTER

•	a • •		
SUBJECT: BR	ISTOL DEITYE		LC
	Name of Limi	ted Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub-	mitted for filing.	
D1		to the following:	
Please return an corresp	oondence concerning this matter	to the following.	
	CHATTA A	MADRILLANI ROTST	ØL.
	LIVI MAPE	Name of Person	
	ι		
	BUT STON IN	ITVSDU CAUTOS	5) ()
	JA 3102 1/2	Firm/Company	
	INLL CORSSTER	ra NO	
	WIT POLCOTOR	Address	
	HIGGT DAIM	2604 El 23403	
	10751 PAIM	City/State and Zin Code	RISTOL ATCES UC 3403 report notification) 377-4192 Daytime Telephone Number & Certificate of Status & Certificate Opy (additional copy is enclosed) address: ration Section on of Corporations
		•	
	City/State and Zip Code CHYPHTAB2012890 MART COM Te-mail address: (to be used for future annual report notification) Ther information concerning this matter, please call: Area Code Area Code Daytime Telephone Number There is a check for the following amount: Area Code Certificate of Status Certified Copy (additional copy is enclosed) Mailing Address: Registration Section Division of Corporations Registration Section Division of Corporations		
	E-mati address. (to be used for intare aimital report for	(Cation)
For further information	concerning this matter, please ca	all:	
CHAITLE	A BOTEODL	ar (51e) 377-1	4192
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
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≥ 325.00 Filing Fee			
	Commence of ordinary		Certified Copy
			(additional copy is enclosed)
gr mr s a s		Steam Addense	
			ction
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P.O. Box 6327		The Centre of Tallahassee	
Tallahassee		2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

22 FEB -7 BN 4: 33

		1. " () () (4. 3.)
BRISTOL DELIVERA (Name of the Limited Liability Comp (A Florida Limited	ANTEES LLC	
(A Florida Limued	Liability Company)	
he Articles of Organization for this Limited Liability Compan	y were filed on 01/12/2022	and assigned
lorida document number <u>L22000026613</u> .		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
he new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or th	te abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS;	A	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	-	
maning daurens MAT BE A TOST OF FICE BOAT		
		,
B. If amending the registered agent and/or registered office	address on our records, enter the t	name of the new regist
agent and/or the new registered office address here:		
Name of New Registered Agent:		
Name Danistana d Office Address		
New Registered Office Address:	Enter Florida stree: address	
	, Florida	
	Ciry	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>	
hereby accept the appointment as registered agent and ag	gree to act in this capacity. I further	agree to comply with
provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as	te performance of my duties, and Le r provided for in Chapter 605 E.S.	am familiar with and Or-it this document i
accept the onligations of my position as registered agent w being filed to merely reflect a change in the registered offic	s provided for in Chapter 605, F.S. re address. I hereby confirm that th	or, q mis aocument i e 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	CYNTHIA BRISTOL	641 FORESTERIA DR. WPB	i ⊠∕kád
		F1, 33403	□Remove
			□ Change
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an effecti <u>(ote:</u> If t	date, if other than the date of filing: Ol 17 22 (optional) ive 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list's effective date on the Department of State's records.	5.0207 (ited as t
record spliced.		er the
ated	Signature of a member of authorized representative of a member	
	[/0]_/	
	Signature of a member or authorized representative of a member	