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COVER LETTER

TO:

	gistration Sec rision of Corp											
eub iezer.	BRENDAN SCHNEIER RE. LLC											
SUBJECT:		Name of Lim	ited Liability Company									
The enclose	d Articles of /	Amendment and fee(s) are sub	mitted for filing.									
Please return	ı all correspo	ndence concerning this matter	to the following:									
		BRENDAN SCHNEIER										
			Name of Person									
			Firm/Company									
		698 NE 1ST AVE. APT. 2	705									
			Address									
		MIAMI, FL 33132										
			City/State and Zip Code									
		BRENDANSCHNEIER@C										
For further i	nformation co	E-mail address: (oncerning this matter, please co	to be used for future annual report notification)									
	SCHNEIER	meetining and matter, predice es	347 578-3368									
	Name of	Person	at () Area Code Daytime Telephone Number									
Enclosed is	a check for th	e following amount:										
☑ \$25.00 l	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)									
	iling Address gistration S		Street Address: Registration Section									
		orporations	Division of Corporations									
Р.О	D. Box 632	7	The Centre of Tallahassee									
Ta	Hahassee, F	IL 32314	2415 N. Monroe Street, Suite 810									

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2077 MAY 23 AM 10: 16

BRENDAN SCHNEIER RE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Compar	y were filed on 01-20-2022	and assigned
Florida document number 1.22000039539		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here;	
BRENDAN SCHNEIER, LLC		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office	e address on our records, <u>enter tl</u>	he name of the new registe
agent and/or the new registered office address here:		
M. CM. D. S. A.		
Name of New Registered Agent:		 -
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	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

<u>Title</u>	Name	Address	Type of Action
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐Change
			□Add
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Filing Fee: \$25.00