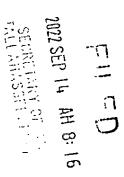


(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	<u>n</u>
(Cit	y/State/Zip/Filone #	·)
D BICK-FIB	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	Certificates o	if Status
ocitifica oopies	_ Octomodics o	
Special Instructions to	Filing Officer:	
•	HORNE	
ÛÚ	1 1 9 2022	
		<u> 9 19</u>
	O#ina Una O !	— (),
	Office Use Only	



05/20/22--01020--003 **35.00





July 29, 2022

COURTNEY B HUGHES-O'CONNELL 3948 THIRD ST SOUTH JACKSONVILLE BEACH, FL 32250 US

SUBJECT: BAMBOO LEADERSHIP INSTITUTE, LLC

Ref. Number: L22000042172

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne Regulatory Specialist II

Letter Number: 822A00017020

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: BAMBOO DAPASHIP COMPANY WSTITUTE Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
CourTNEY HugHES - O'CONNELL
BAMBOO LOADERSHIP WS717476
3948 THIND STRUET SOUTH
JACKSONWUE BEACH, FL 32250 City/State and Zip Code
City/State and Zip Code Courtney & bambooleader group. Com E-mail address: (it be used for future annual report notification)
For further information concerning this matter, please call:
Courtney Highes O'Connell at (904) 474-4223 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
PAID May 2022
Mailing Address: Registration Section Street Address: Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO

FILED

ARTICLES OF ORGANIZATION

()F	FOLK 2FL 14 HIL 0- 12
Ramgoo LEADERS (Name of the Limited Liability Comp (A Florida Limited The Articles of Organization for this Limited Liability Company Florida document number \(\bigcup 22000 \bigcup 217.2 \)	Liability Company)	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial BAMBOO LEAD The new name must be distinguishable and contain the words "Limited Liab	ER GIRDU	P LLC ation "Ll.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		THIRD STREET SOUTH
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3948 TH JACKSONULL	IND STREET SOUTH E REACH, FL 32250
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record	ds, enter the name of the new registered
Name of New Registered Agent:	α	
New Registered Office Address:	Enter Florida st	reet address
		. Florida
	City	Zip Code
Non-Deutschaus Annual Charles and the Deutschaus Annual		

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

<u>Title</u>	<u>Name</u>		Address	Type of Action
				□Add
				Remove
				Change
				□Add
				□Remove
				□Change
			□Add	
	\ \	<u> </u>	□Remove	
	N		□Change	
			□Add	
			Remove	
			□Change	
			□Add	
			□Remove	
			□Change	
				□Add
				□Remove
				□ Change

-	
-	
=	
_	
-	
-	
_	
_	
_	N \ '
_	
_	
-	
-	
(If an eff Note:	ve date, if other than the date of filing: 10-2022 (optional) setive 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 605,0207 (2) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
he recor ord is fil	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	SEPTEMBER 10 ZOZZ
	Signature of a member of authorized representative of a member
	Carryney Hugher O'Conner

Filing Fee: \$25.00