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(Re	equestor's Name)	 -
(Ad	ldress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Dc	ocument Number)	
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A. BUTLER MAY - 2 2022

COVER LETTER

TO:

Registration Section

Division of Corporations			
SUBJECT: 35	M HOLD	INGS LLC	<u></u>
	Name of Lim	ited Liability Company	
The enclosed Articles of Am	endment and fee(s) are sub	mitted for filing.	
Please return all corresponde	nce concerning this matter	to the following:	
	Brando	Name of Person	l bi
	BJW 17	. .	
		Varietta Lane	
		Address	
	<u> Eustis</u>	City/State and Zip Code	Ø
	RMCDIAS	io be used for future annual report notific	
-	E-mail address: (1	to be used for future annual report notific	cation)
For further information conc	erning this matter, please ca	all:	
Brondon S	Marald	at (401) 408	8\Q\d Telephone Number
Name of Fe	SOIL	Area code 12ayune	retephone (vianos)
Enclosed is a check for the fo	ollowing amount:		
\$\$.\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Sec		Street Address: Registration Sect	
Division of Corp P.O. Box 6327	OTATIONS	Division of Corp The Centre of Ta	
Tallahassee, FL	32314		Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	OF	FILED
BJM HOLDING	os il	(2022 APR ~8 PM 2: 06
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears o Liability Company)	SECOND STATE OF
The Articles of Organization for this Limited Liability Company	y were filed on	SECRETARY OF STATE TO THE STATE and assigned
Florida document number <u>LJA0006 197</u> 4		,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here	:
BJM FLORIDA HOLD	INGS L	LC
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the desig	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office	address on our reco	ords, enter the name of the new register
agent and/or the new registered office address here:		
Name of New Registered Agent:	***	
New Registered Office Address:		
- :: — 	Enter Florida	street address

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.

City

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
			□Remove
			Change
		□Add	
			Псточе
			□Change
			□Add
			☐ Change
		□Add	
		Петюvе	
		Change	
		□Add	
		□Remove	
		Change	
			Петоve
			∏ Change

D. II uiii	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
•	
-	
(lf an ef Note:	ive date, if other than the date of filing:
If 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 the led.
Dated	04/04/2022
	- Janua Murco
	Signature of a member or authorized representative of a member
	Typed or printed name of signee