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COVER LETTER

Division of Corp	porations				
SUBJECT:	BOSSWMAN, Name of Limi	ted Liability Company			
The enclosed Articles of A	Amendment and fee(s) are subt	mitted for filing.			
Please return all correspon	ndence concerning this matter t	to the following:			
		Name of Person			_
	BUS	SWMAN, LLC.			_
	10250 He	Firm/Company ERITAGE PAY Address	BLVD	APT.	3614
	NAPLES, rhamb	FL. 34120 City/State and Zip Code over Clive. Coo o be used for future annual) report notification	n)	_
For further information co	oncerning this matter, please ca	11:			
Rhorda 3	Posman Person	at (<u>312</u>) Area Code	Daytime Teler	5127	<u></u>
Enclosed is a check for the			,		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enc	/	Certifie	ate of Status &

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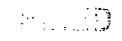
TO:

Registration Section

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 HAY 20 AM 9: 09

BOSS W MAN,	LLC.		TOWN TO SHARE
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appear ability Company)	s on our records.)	MITT LUCE, FL
The Articles of Organization for this Limited Liability Company	were filed on	2-24-22	and assigned
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the de	esignation "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 adapted and/or the new registered office address here:	ddress on our re	ecords, <u>enter the na</u>	nme of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Fiduless.	Enter Flori	da street araress	<u></u>
		Florida _	
N. D. C. L. D. C. L. D.	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of a rovided for in C	my duties, and I an hapter 605, F.S. O	n familiar with and or, if this document is

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
MGZ	DANIEL HAMBURG	300 Penininkle Place	□Add
		Bay Port, 4N 55003	Remove
			□Change
MGR	CASSIE STANG	300 Perimakle Place	🗆 Add
		Bay Port, M. 55003	Remove
			Change
MGR	PHONDA BOSMAN	10250 Heritage Bay Plud	Add
		APT. 3614	
		NAPLES, FL 34120	□ Change
			□Add
			□Remove
			□Change
			□Add
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	ate, if other than the date of filing:^/a(optional)	
effective (date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after riling.) Pursuant to 60.	5.020
te: If the	date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list effective date on the Department of State's records.	ed as
cord spec	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	r the
s filed.		
ed	MAY 16, 2022	
.ca	MAY 16, 2022	
	Hunda Dosman	
	Signature of a member or authorized representative of a member	
	signature of a member of authorized representative of a member	