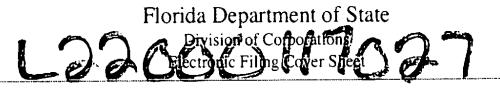
© 03/25/2022 10:31 AM

Division of Corporations

→ 18506176383



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000111055 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

m	Address:		
Emall	Address:		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

BRUNETTI AND BRUNETTI FLORIDA LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00



Electronic Filing Menu Corporate Filing Menu

Help

O 03/25/2022 10:31 AM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

→ 18506176383

Brunetti and Brunetti Florida LLC (Name of the Limited Liability Com	pany as it now appears on our records d Liability Company)	<u>s.</u>)	
The Articles of Organization for this Limited Liability Compar	ny were filed on 03/22/2022	and assign	ed
Florida document number L22000117027			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lis	ability company here:		
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)			-
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered offic	e address on our records, enter	the name of the new r	egistered
agent and/or the new registered office address here:)22 HAR
			# *
Name of New Registered Agent:			<u>~</u> =≥
1000 411			<u>, 68</u>
New Registered Office Address:	Enter Florida street addres	xx - ; -	
	, F1	• *	⊇ Ϋ́O
	City , F1	Zip Code	
New Registered Agent's Signature, if changing Registered Age	nt:		
New Registered Agent's Signature, in changing registered agent and a		adan assa to comb	with the

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>	<u>Name</u>	Address	Type of Action
AMBR	BRUNETTI, CHERYL	5 SUNRISE CT	
		FLEMINGTON, NJ 08822	□ Remove
			■Change
AMBR	BRUNETTI, VINCENT	5 SUNRISE CT	□Add
		FLEMINGTON, NJ 08822	□Remove
			≅ Change
			□Add
			□Remove
			Change
			□Add
			Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			☐ Change

	•		• (al sheets, if nece		
	<u>. </u>	<u> </u>			<u> </u>		<u> </u>	_
								_
						··········		
<u>-</u>	- -	<u></u>						
							·	_
, -								
							<u></u>	_
		•••						
								
								
 -								
			······································			<u></u>		
						····		_
		1						
					 _			
If an effecti Note: If	ive date is listed, the date inserted	than the date one date must be specified in this block do con the Departm	eific and cannot es not meet the	e applicable s	e of filing or mo	re than 90 days after	onal) r filing) Pursuant to s date will not be	605.0207 lis ted as
ne record so ord is filed	pecifies a delaye	ed effective date.	but not an effe	ective time, a	t 12:01 a.m. o	n the earlier of: (l	o) The 90th day a	after the
M Dated	arch 25							
	XXX X	B	ure of a member	_		<u> </u>		_
	_ -	Signat	ure of a member	r or authorized	representative	or a member		

Filing Fee: \$25.00