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2022 JUN 16 AM 11: 45

COVER LETTER

TO:

TO: Registration Division of C	i Section Corporations				
Burkdal					
SUBJECT:		ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.			
Please return ali corre	spondence concerning this matter	to the following:			
	Jacqueline				
		Name of Person			
	ZenBusiness INC				
		Firm/Company			
	5511 Parkerest Drive STE	103			
		Address			
	Austin, Texas, 78731				
		City/State and Zip Code			
	fulfillment@zenbusiness.co				
Don Const. of Bound		to be used for future annual report notifi	ication)		
ror turtner informatio	n concerning this matter, please e	aii:			
Jacqueline Quiroga c	o ZenBusiness INC	844 493-6249 at ()			
Num	ne of Person	Area Code Daytime	Telephone Number		
Enclosed is a check fe	or the following 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 Add		Street Address:	tion		
Registration Section Division of Corporations		Registration Sec Division of Corp			
P.O. Box 6		The Centre of Ta	allahassee		
Tallahasse	e, FL 32314	2415 N. Monroe	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIL.ED

2022 JUN 16 AM 11: 45

Burkdale LLC	Sidakina	14	
Burkdale LLC (Name of the Limited Liability Comp. (A Florida Limited	tny as it now appears on our records.) Liability Company)	ASSEF. FL	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.22000155206}{1.22000155206}$			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	13862 Stansil Ave		
Principal office address MUST BE A STREET ADDRESS)	Odessa, FL 33556		
Enter new mailing address, if applicable:	13862 Stansił Ave		
Mailing address MAY BE A POST OFFICE BOX)	Odessa, FL 33556		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter th	e name of the new regist	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Flori		
	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 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>	Name	Address	Type of Action
MGR	William Manley Perkins	13862 Stansil Ave	□Add
		Odessa, FL 33556	□Remove
			■ Change
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			□Remove
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Effective date, if other than the date (If an effective date is listed, the date must be Note: If the date inserted in this bloc document's effective date on the Department.	e specific and cannot be pro- c does not meet the app	ior to date of filing or dicable statutory fil		filing.) Pursuant to 605	
he record specifies a delayed effective cord is filed.	ate, but not an effectiv	e time, at 12:01 a.m	i, on the earlier of: (b)	The 90th day afte	r the
Dated June 14th	2022				
	lanley Perkins				
Si	gnature of a member or a	ithorized representati	ve of a member		

Filing Fee: \$25.00