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COVEREDITER

Registration Section
Division of Corporations

TO:

SUBJECT:	Brown Hor	met, LLC, a Florida limited lial	bility company	
Sobole 1.		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Eric T. Liney		
		 	Name of Person	
			Firm/Company	
		1740 Alderman Street, #8.	Building A	
		-	Address	
		Sarasota, Florida 34236		
			City/State and Zip Code	
		ericliney@mac.com		
			to be used for future annual report no	otification)
For further in	formation c	oncerning this matter, please co	all:	
Lauren P. Ko	hl		941 966-3575	
,	Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed is a	check for th	ne following amount:		
≡ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Fiting Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.O	. Box 632	Section Corporations	Street Address: Registration S Division of Co The Centre of 2415 N. Monr Tallahassee, F	orporations Tallahassee oe Street, Suite 810

ARTICEES OF AMENDMENT

TO ARTICLES OF ORGANIZATION OF

Brown Hornet, LLC, a Florida limited liability company (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on April 4, 2022 and as: Florida document number L22000160602 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L. 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 records, enter the name of the new agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this documbeing 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.

or removed from our rec	ords:		

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type (
AMBR	Eric T. Liney	1740 Alderman Street, #8, Building A	= A ₁
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D. 11 a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.) This LLC shall be member-managed by the sole member. Eric T. Liney.
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(If ar <u>No</u>	ective date, if other than the date of filing: 11/17/2022
If the re record i	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th days filed.
Dat	ed
	EL 1
	Signature of a member or authorized representative of a member
	Eric T. Liney
	Typed or printed name of signee