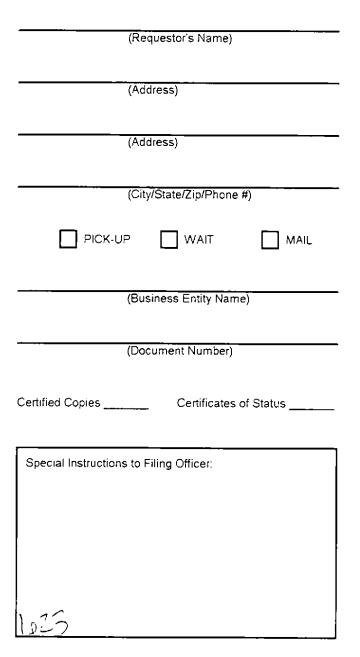
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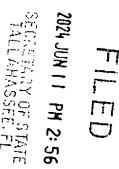


Office Use Only



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COVER LETTER

Registration Section

TO:

Division of Cor	porations		
Services By	RM LLC	•	
SUBJECT:	Name of Lim	ited Liability Company	
The section of Amelet confe	A		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Rene Mears		
		Name of Person	
	-	Firm/Company	
	7203 Sportsmans Drive		
•		Address	
	North Lauderdale FL 3306	8	
•		City/State and Zip Code	
	booking@barbae.buzz	to be used for future annual report not	ification
For further information co	oncerning this matter, please c	-	incation,
Rene Mears		954 638-4903 at ()	
Name of	f Person	Area Code Daytim	ne Telephone Number
Enclosed is a check for th	ne 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 Address Registration S Division of C	oction orporations	Street Address: Registration Se Division of Con	rporations
<u>Mailing Addres</u> Registration S	se following amount: \$\sum \\$30.00 \text{ Filing Fee & Certificate of Status}\$ \$\frac{\state}{2}\$ Section orporations 7	at () Area Code Daytim S55.00 Filing Fee & Certified Copy (additional copy is enclosed) Street Address: Registration Se Division of Con The Centre of T	Certificate of Status & Certified Copy (additional copy is enclose) ection rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SERVICES BY RM LLC				
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)		<u>_</u> .	
The Articles of Organization for this Limited Liability Comp	oany were filed on 04/18/2022		and ass	igned
Florida document number L22000185073				
his amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company here:			
BARBAE LLC				
he new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or	the abbrevia	tion "L.	L.C."
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS	<u> </u>			
			201	
		是 公	7	-
nter new mailing address, if applicable:			S	11
,		55	=	
Mailing address MAY BE A POST OFFICE BOX		<u> </u>	PH	П
		- (O)	<u> </u>	J
 If amending the registered agent and/or registered off gent and/or the new registered office address here: 	ice address on our records, enter the			v registo
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			•
	. Florid	ធ		
	City		p 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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			Change
			□Add
·			□ Remove
			☐ Change
			□ Remove
			Change
			□Add
			□Remove
		-	□ Change
			□ Add
			□Rетоvе
			□ Change

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	Rene Mears		<u>, va</u>	•	
	Rene Mears	,	120 MICA		
David Maries		-	Signature of a member or authorize	ed representative of a member	.
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Filing Fee: \$25.00