122000211078

(Requesto	or's Name)
(Address)	
(Address)	_
(* (331055)	
(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
·	• •
(Decumo)	nt Number)
(Documen	k Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:



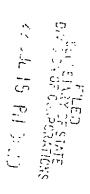


700390853717

07/15/22--01026--003 **60.00

S. CHATHAM

OCT - 9 2022



COVER LETTER

TO: Registration Section Division of Corpor	
SUBJECT: Bro	ooke Vibrant Studios LLC
	Name of Limited Liability Company
The enclosed Articles of Am	endment and fee(s) are submitted for filing.
Please return all corresponde	nce concerning this matter to the following:
	Brooke Sutaris Name of Person
	Name of Person
	Brooke Vibrant Studios LLC
	475 SE-1st Street Art 712
	Address
	Pampano Beach FL 330GC
_	Pampano Beach FL 330GC Brookevibrant studio 3 @gmail.com
	E-mail address: (to be used for future annual report notification)
For further information conce	erning this matter, please call:
Brocke	Suturis at (607) 434 7976 Area Code Daytime Telephone Number
Name of Per	son Area Code Daytime Telephone Number
Enclosed is a check for the fo	ollowing amount:
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

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

Brook	L Vibro	ant!	Studios	LLC
(Name of the Limite	d Liability Company A Florida Limited Lia	as it now appointed the second of the second	pears on our records.) (v)	
The Articles of Organization for this Limited Lia Florida document number	nbility Company w 21107\$	ere filed on	05-04-20	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabili	ty company	here:	
The new name must be distinguishable and contain the wo	•	Company," t	he designation "LLC" (or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET	(ADDRESS)			<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	3 <i>0X</i>)			C. 15 1
B. If amending the registered agent and/or re		dress on ou	r records, enter th	ne name of the new registere
agent and/or the new registered office address	here:			
Name of New Registered Agent:	B	rooke	Sutaris Street	112
New Registered Office Address:	475 SE	Enter.	Street Florida street address	
	Pompa	Ciny	Florida street address	ida 33060 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address 1175 SF 294 Street AP 717
MCR	Brooke Sutaris	Address H75 SF 29+ Street AP+ 712 Pompare Beach FL DAdd 33060
		□Remove
		□Add
		CT CANADOM CO
		Remove €
		Change
		□Add
		□Remove
		□Change
		□Add
		□Remove
		Change
		\Add
		□Remove
		□ Change

		····				
					<u>.</u>	
 .						
						
						. 0
			_			- 55
						
						<u>ဟ ကိုသိုင်</u>
_			·			<u> </u>
			<u>.</u> .			
						,
_						
_		-				
-						
ate, if other tha	a the date of fi	iling:			(optional)	
date is listed, the da	te must be specific	and cannot be pr	or to date of filing	or more than 90	days after filing.) Pursuant to 605.020
effective date on	the Department	of State's recor	ds.	ming requiren	nems, this date	will not be listed a
cifies a delayed ef	fective date, but	not an effective	time, at 12:01 :	a.m. on the earl	lier of: (b) Th	e 90th day after the
tan 0 -		3				
16-50		B. 20°	U.			
		05/				
		<u> </u>				
	Signature of	of a member or au	thorized represent	tative of a memb	er	
		R.	22/	- \- ()	_	
c	date inserted in the effective date on the cifies a delayed eff	ate, if other than the date of fidate is listed, the date must be specific date inserted in this block does neffective date on the Department cifies a delayed effective date, but	ate, if other than the date of filing: date is listed, the date must be specific and cannot be predate inserted in this block does not meet the appetificative date on the Department of State's record cifies a delayed effective date, but not an effective date of a member of au	ate, if other than the date of filing: date is listed, the date must be specific and cannot be prior to date of filing: date inserted in this block does not meet the applicable statutory effective date on the Department of State's records. cifies a delayed effective date, but not an effective time, at 12:01 CGCSOMMAN Signature of a member or authorized represen	ate, if other than the date of filing: date is listed, the date must be specific and cannot be prior to date of filing or more than 90 date inserted in this block does not meet the applicable statutory filing requirent effective date on the Department of State's records. Eifies a delayed effective date, but not an effective time, at 12:01 a.m. on the early signature of a member or authorized representative of a member.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The