

L22000255312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

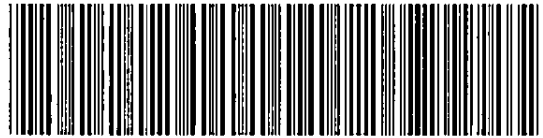
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J. HORNE

SEP 24 2024

Office Use Only



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09/18/24--01021--003 \*\*35.00

FILED  
2024 SEP 18 PM 12:08  
U.S. DISTRICT COURT  
NORTH DAKOTA  
GRAND FORK

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BAMFS LLC**

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jennifer Gross

\_\_\_\_\_  
Name of Person

Uncle Funz Provisions

\_\_\_\_\_  
Firm/Company

6640 Gulf Blvd.

\_\_\_\_\_  
Address

St. Pete Beach, FL 33706

\_\_\_\_\_  
City/State and Zip Code

manager@unclefunz.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer Gross

727 204-6223  
at (\_\_\_\_\_) \_\_\_\_\_  
Area Code Daytime Telephone Number

\_\_\_\_\_  
Name of Person

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

FILED  
2024 SEP 18 PM 12:03

BAMFS LLC

(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 06/03/2022 and assigned  
Florida document number L22000255312.

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.L.C."

Enter new principal offices address, if applicable:

**(Principal office address MUST BE A STREET ADDRESS)**

6640 Gulf Blvd.

St. Pete Beach, FL 33706

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

6640 Gulf Blvd.

St. Pete Beach, FL 33706

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Jennifer Gross

New Registered Office Address:

6640 Gulf Blvd.

*Enter Florida street address*

St. Pete Beach

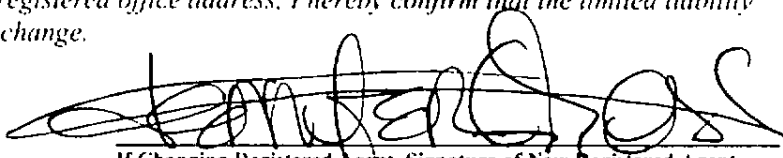
*City*

Florida 33706

*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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Phillip B Yost	360 Central Ave Suite 450	<input type="checkbox"/> Add
		St. Petersburg, FL. 33701	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jennifer Gross	6640 Gulf Blvd.	<input checked="" type="checkbox"/> Add
		St. Pete Beach, FL. 33706	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Zack Gross	6640 Gulf Blvd.	<input checked="" type="checkbox"/> Add
		St. Pete Beach, FL.33706	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If appending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\* Removing Phillip Byrd

\* Adding Jennifer Gross

\* Adding Zach Gross

E. Effective date, if other than the date of filing: 09/06/2024 (optional)

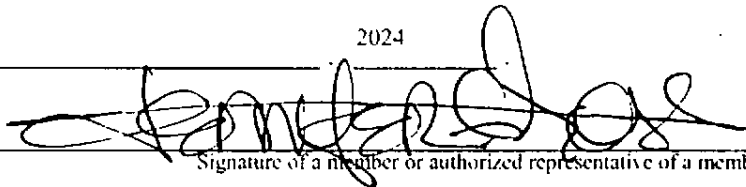
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 09/06

2024



Signature of a member or authorized representative of a member

Jennifer Gross

Typed or printed name of signee

Filing Fee: \$25.00