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COVER LETTER

TO:

Registration Section Division of Corporations

SB93, LLC SUBJECT:		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:			
	STEPHAN BIO				
		Name of Person			
		Firm/Company		.,	2022
	3260 NW 84TH AVE				EE 2
		Address		.1	۵
	SUNRISE/FL 33351				武 (0)
		City/State and Zip Code		; T	8: 05
	JBABYJONES95000@gma	nd.com to be used for future annual report not	ification)		
Con Combine to Commission			arreation)		
Por turther information c	oncerning this matter, please c	dil.			
STEPHAN BIO		954 496-5083 at ()			
Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	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 Fili Certificate Certified C (additional co	of Status Copy	
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, I	Section Corporations 17	Street Address: Registration Set Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Tallahassee oe Street, Suite 81	0	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SB93, LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our rec nited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Comp	pany were filed on	and assigned
Torida document number 1.22000316043		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "L	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES.	<u> </u>	
		20
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		AS I
 If amending the registered agent and/or registered of gent and/or the new registered office address here; 	fice address on our records, <u>ent</u>	ter the name of the new registo
Name of New Registered Agent:		
New Registered Office Address:	Estan Elizabet a success of	
	Enter Florida street address	
		Florida
	City	Zin 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
PRES	BIO, STEPHAN	3260 NW 84TH AVE	□Add
		SUNRISE, FL 33351	□Remove
			Change
MGR	BIO, STEPHAN	3260 NW 84TH AVE	□Add
		SUNRISE, FL 33351	□Remove
			= Change
CEO	BIO, STEPHAN	3260 NW 84TH AVE	□ Add
		SUNRISE, FL 33351	≅Remove
			□Change
		· · · · · · · · · · · · · · · · · · ·	202dd Add Remove
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Effective date, if other than the date of filing: (optional) (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 605.02 force; (if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed allocument's effective date on the Department of State's records. (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 dis filed.			
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	07/19	2022	
	ated	MI	
Signature of a member or authorized representative of a member			
	STEPHAN BIO		
STEPHAN BIO		Typed or printed name of signee	