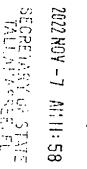
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COVER LETTER

TO:

P.O. Box 6327

Tallahassee, FL 32314

TO: Registration S Division of Co				
SUBJECT:	Buddhu Be Name of Limi	ted Liability Company		
The enclosed Articles of	f Amendment and fee(s) are subr	nitted for tiling.		
Please return all corresp	ondence concerning this matter t	to the following:		
	Meyan F	Name of Person Firm/Company		
	370	Midtown Or Address	# 3ZO(28	
	Tampa	City/State and Zip Code	2022 HOV -7	4 * * 4 •
	[]	o be used for future armual report notifi	Transfer to the second	IJ
For further information (concerning this matter, please ca	ill:	58	
Mega Name o	agret Nelson	$\frac{\text{at } (919)}{\text{Area Code}} \frac{475}{\text{Daytime}}$	- 507-7 Telephone Number	
Enclosed is a check for t	the following amount:			
525.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre Registration Division of O		Street Address: Registration Sec Division of Corp		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Buddhe Be	ear UU
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L220094457</u> 21	were filed on 10 17 2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab $\bigcup \bigcup A$	pility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)	NIA ZE Z
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIX 58
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new register
Name of New Registered Agent:	NIA
New Registered Office Address:	Enter Florida street address
	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>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	Type of Action
MGR	Megan Pagnet Nelson	3701 Hidtan Dr	_ LAdd
	U	A 3201	□Remove
		Tamper, FC 3560	7 Change
AMBR	Scott Hoelscher		_
-		As above	□Remove
			(Elichange
		· · · · · · · · · · · · · · · · · · ·	Add 2022 Tenove
			Remove
			□Change □Add
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			□Add
			□Remove
			□Change

printed name of signee