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(Reque	estor's Name)	
(Addre	ss)	
(Addre	ss)	
(City/S	tate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busine	ess Entity Name)	
(Docur	ment Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filia	ng Officer:	
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Office Use Only



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COVER LETTER

Div	ision of Corp	porations		
SUBJECT:	SB Ventures			
			ited Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		Stephanic Goebel		
			Name of Person	
		ZenBusiness Inc.		
			Firm/Company	
		5511 Parkerest Drive, Ste.	103	
			Address	
		Austin, TX 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.co		
		E-mail address: (i	to be used for future annual report notifi	ication)
For further in	nformation co	ncerning this matter, please ca	all:	
Stephanie Goebel c/o ZenBusiness Inc.		at () 493-6249 Area Code Daytime		
Name of Person		Area Code Daytime	Telephone Number	
Enclosed is a	check for the	e following amount:		
■ \$25.00 F	iling 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:

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Registration Section

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SB Ventures LLC		
(<u>Name of the Limited I</u> (A l	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabi	ty Company were filed on 2022-11-10 and assigned	
Florida document number 1.2200048,3889	·	
This amendment is submitted to amend the following	ing:	ited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
A. If amending name, enter the new name of the	e limited liability company here:	
Bender Bookkeeping LLC		
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbreviation "LL.C."	_
Enter new principal offices address, if applicable	e:	_
(Principal office address MUST BE A STREET A	ADDRESS)	_
	·	
		•
Enter new mailing address, if applicable:	202	_
(Mailing address MAY BE A POST OFFICE BO.		
		•
		-
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:	
	三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三	
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	_
New Registered Office Address:		
	Enter Florida street address	•
	5 1	
_	Florida	-

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 = M $AMBR = A$	anager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			D Add
			□ Remove
			Change
			Add
			Remove
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ective date, if other than the d effective date is listed, the date must l te: If the date inserted in this bloc nument's effective date on the Dep	k does not meet the app	licable statutory	or more than 90 days ; filing requirements.	ptional) after filing.) Pursuant to 60 this date will not be lis	05.020 sted a
record specifies a delayed he 90th day after the recor	effective date, but d is filed.	not an effecti	ve time, at 12:0	1 a.m. on the earl	lier (
ed	. 2022				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00