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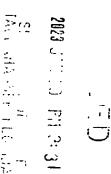
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## **COVER LETTER**

TO: Registration Sec Division of Corp		• • •	
SUBJECT:	SUSINESS MI Name of Lim	NOSE + RENTO	15_
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	idence concerning this matter	to the following:	
	Ninc	Donald Name of Person	
	Busin	ess Minds + B	<u>entals</u>
	7807	Vector Dr. Address	2023 J
	<u>Orlan</u>	City/State and Zip Code	
	DUSINESS E-mail address: (	MindSet 42 dlg Mc to be used for future annual report notif	
For further information co	oncerning this matter, please co	all:	ie.
Name of	Donald' Person	at (	OOO \( \frac{1}{2} \) e Telephone Number
Enclosed is a check for th	e 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 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Address</u> Registration S	ection	Street Address: Registration Sec	
Division of Corporations		Division of Cor The Centre of T	-
P.O. Box 632 Tallahassee, F			e Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BUSINESS MINOS (Name of the Limited Liability Comp. (A Florida Limited	oct Dentus any as it now appears on our red Liability Company)	Cords.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000 50 64 6 9</u>	were filed on 12 01	2022	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "	LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		70	<del>20</del> 2
			(
Enter new mailing address, if applicable:		7	
(Mailing address MAY BE A POST OFFICE BOX)			<del>-,</del>
		i. n	<u></u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, en	iter the name (	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street ad	ldress	
		, Florida	
	City		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 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
MGR	Nina Ponald	7807 Nectar Or. Orland	<u>dokl</u> akaa 2819
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			Change
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an effective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior to date of filing or more total. If the date inserted in this block does not meet the applicable statutory filing rocument's effective date on the Department of State's records.	(option than 90 days after requirements, this	filing.) Pt	rsuant to 60 I not be li	05,020 sted a:
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on lis filed.	the earlier of: (b	) The 9	0th day af	ter the
ated $1/7$ $2023$				