## L23 000 200194

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:			
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Red	questor's Name)	-
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Add	fress)	
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Add	iress)	
PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(City	/State/Zip/Phone #)	
(Document Number)  Certified Copies Certificates of Status	PICK-UP	☐ WAIT	MAIL
(Document Number)  Certified Copies Certificates of Status			
Certified Copies Certificates of Status	(Bus	iness Entity Name)	
Certified Copies Certificates of Status			
	(Doc	cument Number)	
Special Instructions to Filing Officer:	Certified Copies	Certificates of	Status
Special Instructions to Filing Officer:		_	
	Special Instructions to F	Filing Officer:	

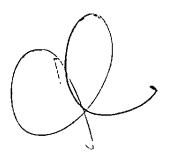




000408351180

05/08/23--01025--027 \*\*25.00

17 1 E. E. 22 2023 HAY -8 PH 12: 22



## COVER LETTER

TO: Registration So Division of Cor			
SUBJECT:A	Better Way	Behaufor LLC	<u>C.</u>
		. , .	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Bosmery	Pake 3.	<del></del>
	A Bett	ar Way Bohowist	JJC.
	10940 SW 38	8th St Address	2023 HAY -8 PH 12: 22
	Miam	ii FC 33165 City/State and Zin Code	-8 74 MASS
		City/State and Zip Code  597 (2) 4 a hoo co a  to be used Toy future annual report notif	12: 22
For further information c	concerning this matter, please c		
Bosmery	Perez	at ( <b>716</b> ) <u>2/2</u> Area Code Daytim	9580
Kame c	d Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he 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 Addre</u> Registration		<u>Street Address:</u> Registration Sec	rtion
Division of C		Division of Cor	
P.O. Box 632	27	The Centre of T	allahassee
Tallahassee.	FL 32314	2415 N. Monroe	e Street, Suite 810

Tallahassee, FL 32303

## , ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Principal office address MUST BE A STREET ADDRESS)	
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 abbreviate the new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	nd assigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviate Company and the principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	
(Principal office address MUST BE A STREET ADDRESS)	w "L.IC."
(Principal office address MUST BE A STREET ADDRESS)	103 E
	at is submitted to amend the following:  g name, enter the new name of the limited liability company here:  st be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LL
	Φ
Enter new mailing address, if applicable:	PH 12:
(Mailing address MAY BE A POST OFFICE BOX)	y Company were filed on
agent and/or the new registered office address here:	e new registered
Name of New Registered Agent:	•
New Registered Office Address:  Enter Florida street address	····-
, Florida	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
MGB	Bosmery Perez	10940 Sω 38th st Miami FC, 33145	<b>&amp;</b> Add
			Remove
			🗆 Change
AMBR	Bosmery Perez	10940 Sw 28 HS+ Mi Fl, 33145	<u>api</u> . ●Add
			Remove
			2003 HAY ® PHÃZ: 22 Change
		<u> </u>	7 M∆dd €
			: 22 ☐ Change
			□Add
			Remove
			□ Change
			□Add
		<del>-</del>	□Remove
			□Change
			□Add
			□Remove
			(TChange

									-
<del></del>						•			-
									-
									•
·		<del></del>						<u>-</u>	-
	· · · · · · · · · · · · · · · · · · ·								_
									•
				<del>-</del>					-
				<del></del>					
			<del></del>	<del></del>					-
							<u> </u>	2023	_
								YAH	.a.
							HAS	8	3.
<del></del>	*			<u>,, , , , , , , , , , , , , , , , , , ,</u>			—————————————————————————————————————	_ <del>_</del>	. () . ()
<del></del>							E S	12:2	. 4
				<del></del>			<u> </u>	~	-
reffective date <u>te:</u> If the dat	, if other than the day is listed, the date must be the inserted in this block ective date on the Depar	specific and ea does not me	annot be prior et the applic	able statutory	or more than filing requir	(option 90 days after the concents, this	<b>nal)</b> iling.) Pursua date will no	nt to 605 t be list	5.020 .ed a
	·								
ecord specific s filed.	s a delayed effective da	te, but not a	n effective ti	me, at 12:01	a.m. on the e	arlier of: (b)	The 90th o	lay afte	r the
ied	05/04		2023	·					
	et.	sulting and a same	onher or author	rized represen	tative of a mer	nber			