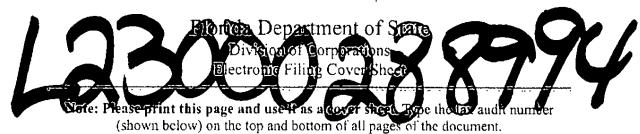
7/24/23, 1:43 PM

To:

Division of Corporations



(((H23000257444 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 : (305)444-4994 Fax Number : (305)328-4774

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			
FINGTT	Muul Coo.			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **CLK BROTHERS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

T LEMIEUX JUL 25 2023

ARTICLES OF AMENDMENT 'TO ARTICLES OF ORGANIZATION OF

F	CLK BROTHERS LLC	<i>\$</i>
		Liability Company as it new appears on our records.) Florida Limited Liability Company)
	of Organization for this Limited Liabil ment number 1.23000288994	ility Company were filed on 06/14/2023 and assigned
This amendn	nent is submitted to amend the following	ng:
A. If ameno	ling name, enter the new name of the	e limited liability company here:
Enter new p	must be distinguishable and contain the words orincipal offices address, if applicable office address MUST BE A STREET A	
Enter new n	nailing address, if applicable:	
Mailing add	<u>(ress MAY BE A POST OFFICE BO.</u>	<u> </u>
B. If amend	ling the registered agent and/or regis r the new registered office address b	stered office address on our records, enter the name of the new register
		<u></u>
<u>Na:</u>	ne of New Registered Agent:	
Nev	w Registered Office Address:	Enter Fiorida street address
		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
	-	

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

- Page: 4 of 5

To:

2023-07-24 18:19:52 GMT

13053284774

From: Yanet Avila

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
AMBR	MILGIAN E. GATO	P.O. BOX 127782	□Add
		HIALEAH, FL 33015	
			☐ Change
			Add
			□Change
			□∧dd
			□Remove
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fectiv	e date, if other than the date of filing: (optional) tive 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 605.0207 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records.
<u>re:</u> 11	
cord	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
cunser	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 i. $\frac{7/+o/23}{}$
cunser ecord is filed	
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