

L23000325960

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

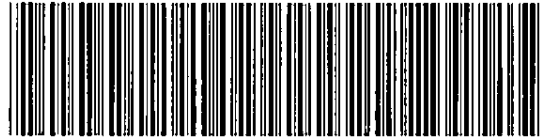
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
MAY 9 9:27

N. HUNT
04/03/24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1420 N Atlantic 302 LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher S. Tobin
Name of Person

Law Guys PLLC
Firm/Company

1555 Rio Grande Avenue
Address

Fort Worth, Texas 76102
City/State and Zip Code

filings@strlawguys.com
E-mail address: (to be used for future annual report notification)

RECEIVED
STATE
OFFICE
TALLAHASSEE, FL
MAY 9 9:27

For further information concerning this matter, please call:

Lainie Roland 844 478-7529
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

1420 N Atlantic 302 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on July 10, 2023 and assigned
Florida document number 1.23000325960.

This amendment is submitted to amend the following:

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 abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Brandishing Riches Management LLC, c/o Law Guys PLLC

1555 Rio Grande Avenue

Fort Worth, Texas 76102

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Brandishing Riches Management LLC, c/o Law Guys PLLC

1555 Rio Grande Avenue

Fort Worth, Texas 76102

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:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, **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 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>	<u>Address</u>	<u>Type of Action</u>
ATTY	Christopher S Tobin	1555 Rio Grande Avenue	<input type="checkbox"/> Add
		Fort Worth, Texas 76102	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Brandishing Riches Management L	c/o Law Guys PLLC	<input checked="" type="checkbox"/> Add
		1555 Rio Grande Avenue	<input type="checkbox"/> Remove
		Fort Worth, Texas 76102	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

11/16/2017 11:02 AM

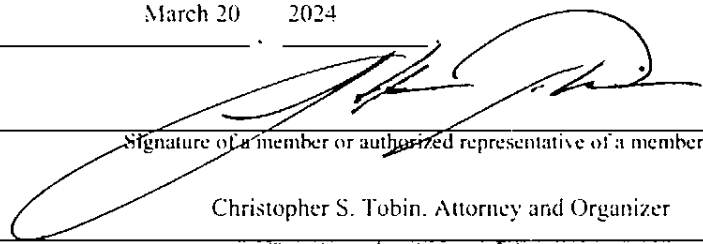
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

APR 27
 10:51 AM
 STATE SECRETARY
 OF
 TREASURY

E. Effective date, if other than the date of filing: _____ **(optional)**
 (If an effective 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 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated _____ March 20, 2024



Signature of a member or authorized representative of a member

Christopher S. Tobin, Attorney and Organizer

 Typed or printed name of signee