



## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 305 WORX 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:

NAZLI DOGA MERIC, ESQ

\_\_\_\_\_  
Name of Person

305 WORX LLC

\_\_\_\_\_  
Firm/Company

11575 NW 7 AVENUE

\_\_\_\_\_  
Address

MIAMI, FL 33168

\_\_\_\_\_  
City/State and Zip Code

dogameric@beai.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NAZLI DOGA MERIC, ESQ

at ( 305 ) 461 2053

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
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



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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove



NAME RELEASE AFFIDAVIT

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

BEFORE ME, the undersigned authority, duly authorized to administer oaths and take acknowledgments, personally appeared Bruno E. Ramos who, after being by me first duly cautioned and sworn upon oath, deposes and says:

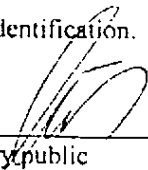
1. I am over the age of 18 years, and I am authorized to make this statement on behalf of dissolved AM-BRANCHES HOLDINGS, LLC (document number L24000034030). I am the signatory/manager of UNIVERSITY RENTAL HOLDINGS, LLC (document number L22000231518) which is the Manager for dissolved AM-BRANCHES HOLDINGS, LLC.
2. AM-BRANCHES HOLDINGS, LLC has been dissolved on January 24, 2024, and the articles of dissolution is enclosed herein to this Statement (Exhibit-1).
3. 305 WORX, LLC intends to file an Amendment to the Articles of Organization to change its name to AM-BRANCHES HOLDINGS, LLC.
4. AM-BRANCHES HOLDINGS, LLC is dissolved and have no intention of revoking the dissolution or file a reinstatement.
5. AM-BRANCHES HOLDINGS, LLC hereby releases its name for use of 305 WORX, LLC so that 305 WORX, LLC can file an Amendment to the Articles of Organization and change its name to AM-BRANCHES HOLDINGS, LLC.

Further affiant sayeth not.



Bruno E. Ramos, Manager  
On behalf of  
Dissolved AM-BRANCHES HOLDINGS, LLC  
As Manager, the UNIVERSITY RENTAL  
HOLDINGS, L.L.C

The foregoing instrument was sworn to and subscribed before me this 27 day of  
February, 2024, by Bruno E. Ramos, who is  personally known to me or  
 who produced \_\_\_\_\_ as identification.

  
\_\_\_\_\_  
Notary public

Nazli Doga Meric  
Printed name of notary public

Seal of notary public:



Exhibit-1: Articles of Dissolution of AM-BRANCHES HOLDINGS, L.L.C

**FILED**  
**Jan 24, 2024**  
**Secretary of State**

## **ARTICLES OF DISSOLUTION**

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:

AM-BRANCHES HOLDINGS, LLC

The document number of the limited liability company: L24000034030

The file date of the articles of organization: January 17, 2024

A description of occurrence that resulted in the limited liability company's dissolution:

WRITTEN CONSENT OF THE MEMBERS

The name and address of the person appointed to wind up the company's activities and affairs:

BRUNO E RAMOS  
11575 NW 7 AVE  
MIAMI, FL 33168 US

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: BRUNO E RAMOS

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Electronic Signature of authorized person