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| (Re | equestor's Name) | |
|---|--------------------|-----------|
| (Ac | idress) | |
| (Ac | idress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | | MAIL |
| (Bu | isiness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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| | Office Use On | 1.z |



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| ARTICLES OF AMENDMENT |
|---------------------------------|
| ТО |
| ARTICLES OF ORGANIZATION |
| OF |

| (Name of the Limited Liability Com | nany as it now appears on our records.) | |
|--|--|--------------------|
| (A Florida Limite | pany as it now appears on our records.) a Liability Company) | |
| The Articles of Organization for this Limited Liability Compa Florida document number | ny were filed on | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, <u>enter the new name of the limited li</u> | ability company here: | |
| BUYology Bar LLC | | |
| The new name must be distinguishable and contain the words "Limited Lia | bility Company," the designation "LLC" or the abb | reviation "L.L.C." |
| Enter new principal offices address, if applicable: | same address | |
| Principal office address MUST BE A STREET ADDRESS) | | |
| | | 2202 ARC |
| | | STatis |
| Enter new mailing address, if applicable: | Same address | T ₂ |
| | | |
| A W HANDE A DOST OFFICE BOY | | |
| Mailing address MAY BE A POST OFFICE BOX | | Sig H |
| Mailing address MAY BE A POST OFFICE BOX) | | |
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| B. If amending the registered agent and/or registered offic | e address on our records, <u>enter the name</u> | of the new registe |
| B. If amending the registered agent and/or registered offic | e address on our records, <u>enter the name</u> | of the new registe |
| B. If amending the registered agent and/or registered offic | | of the new registe |
| (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered offic agent and/or the new registered office address here: <u>Name of New Registered Agent</u> : | e address on our records, <u>enter the name</u> Same Agent Same Addrew | of the new registe |

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.

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SAME Agent If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

| Only Amending the name change | from |
|---|-------------|
| Only Amending the name change Buology Baruc to Buyology Bar UC | |
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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.

| Octo | ber 16th | 2023 |
|-------|----------|---|
| Dated | | · · · · · · · · · · · · · · · · · · · |
| - | | C. Andewsen Signature of a member or authorized representative of a member rsen |

Typed or printed name of signee