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(Requestor's Name)
(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.





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COVER LETTERS

TO:	Registration Division of C			
SUBJE	CT: SRB BU	Y LLC		
		Name of Lim	ited Liability Company	
The enc.	losed Articles o	of Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all corres	pondence concerning this matter	to the following:	
		GUILLERMO ARENA		
			Name of Person	
		SRB BUY LLC	Firm/Company	
			, <i>, , , , , , , , , , , , , , , , , , </i>	
		5738 SUNSET DR	Address	
		SOUTH MIAMI, FL 3314	3	
			City/State and Zip Code	
		GNARENA@GMAIL.CO		
For furtl	ner information	n-mail address: in concerning this matter, please c	to be used for future annual report notiful:	ncaden)
GUILL	ERMO AREN	۸	at (786) 6269377	
	Name	e of Person	at (786) 6269377 Area Code Daytime	e Telephone Number
Enclose	d 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)
	<u>Mailing Addi</u>		Street Address:	
	Registration		Registration Sec	
	Division of	Corporations	Division of Cor	porations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SRB BUY LLC		
(Name of the Limite	d Liability Company as it now appears on our records A Florida Limited Liability Company)	_)
The Articles of Organization for this Limited Lia	ability Company were filed on 11/06/2023	and assigned
lorida document number 1.23000501905		
his amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
he new name must be distinguishable and contain the wo	ords "Limited Eiability Company," the designation "LLC"	or the abbreviation "L.L.C."
Inter new principal offices address, if applica	ble:	· · · · ·
Principal office address MUST BE A STREET	TADDRESS)	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE B	<u></u>	
		7
		
. If amending the registered agent and/or re	gistered office address on our records, <u>enter t</u>	he name of the new registe
gent and/or the new registered office address	s here:	
		<u>.,</u> .
Name of New Registered Agent:		<u>-</u>
N D 1 100 Att		•
New Registered Office Address:	Enter Florida street address	<u></u> <u>41</u>
	. Flo	

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 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
MGR	Guillermo Nicolas Arena	7571 SW 96TH CT	
		SOUTH MIAMI, FL 33143	Remove
			☐ Change
			□ Remove
			Remove,
			Change
			□Add _
			□Remove ω
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ective date, if other	r than the date of filit the date must be specific a	ng:		(optional)	-
te: If the date inserte	the date must be specific a ed in this block does not te on the Department of	t meet the applicable	te of filing or more than 90 statutory filing requires) days after filing.) Pursu a n nents, this date will not	t to 605.929 be listed a
ecord specifies a delay s filed.	ed effective date, but no	ot an effective time,	at 12:01 a.m. on the ear	lier of: (b) The 90th d	ay after the
ed DECEMBER 11		- · 2023	\mathcal{N}		
			representative of a memi	N.IF	
	Signature of	a member or authorized	representative of a menu	ACT.	