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2024 MAR 27 PH 4:41 SECRETARY OF STATE

COVER LETTER

TO:

TO: Registration Sec Division of Corp			1.	
subject: <u>Вио</u> ч	ant Brillance 1	Tarine Detailing 110		
- COO	Name of Lin	nited Liability Company		
The enclosed Articles of A	mendment and fee(s) are sul	omitted for filing.		
	dence concerning this matter	-		
	Ruan Fax	ins		
	Mari Rak	Name of Person		
		liance Marine Det	2024 MAR 27 PN 4:41 SECRETARY OF STATE TAIL AHASSEE, FL	-
	5241 cedar 1	akerd Apt 428	27 P ARVII AHAS	í" •
		Address	第一年 四の一年	•
	Baynton Beach	i, Florida 33437		
		City/State and Zip Code		
	E-mail address:	to be used for future annual report no	tification)	
For further information cor	ncerning this matter, please of	all:		
Ryan Earli Name of I	n5	ai (561) 895	1476	
Name of I	Person	at (Bol) 895 Area Code Dayti	me 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 Se Division of Co P.O. Box 6327	ection	Street Address: Registration S Division of Co The Centre of	orporations	
Tallahassee, FI	_ 32314		oe Street, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Buoyant Brilliance Marin	e Detailing 11c
(Name of the Limited Liability Compar (A Florida Limited L	ay as it now appears on our records.) lability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2400063916</u> .	were filed on 02/05/2024 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	
Enter new principal offices address, if applicable:	APPER TO
(Principal office address MUST BE A STREET ADDRESS)	27
Enter new mailing address, if applicable:	EG P
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code

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
AMBR	Ryan Eakins	5241 CEDAR LAKERD 428 Boynton Beach, FL33437) X(Add
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fective date, if other than n effective date is listed, the date ote: If the date inserted in the cument's effective date on the	e must be specific an its block does not t	nd cannot be prior to meet the applica	o date of filing or able statutory fil	more than 90 days	optional) s after filing.) Purs s, this date will r	uant to 6 not be 1	605.0207 isted as
ecord specifies a delayed effo is filed.	ective date, but no	ot an effective tir	ne, at 12:01 a.n	on the earlier	of: (b) The 90th	h day at	fter the
ted 9 February		2024	L				
	Signatura so	mercher or such	Frad representati	ue of a mambar			
	Signature of a	a member or autho	fized representati	ve of a member			