



Office Use Only





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COVER LETTER

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TO: Registration Section

Division of Cor	porations		•
	T BRILLIANT MINDS, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	MARIE I. CONSTANT		
		Name of Person	
		Firm/Company	
	231 NW 15TH STREET		
		Address	
	BOCA RATON, FL 33432	2	
		City/State and Zip Code	
	MLUNIE79@YAHOO.CO		•
		to be used for future annual report notif	ication)
For further information c	oncerning this matter, please ca	all:	
MARIE L CONSTANT		845 233-1146 at ()	
Name o	f Person		: Telephone Number
Enclosed is a check for the	ne 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 S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Sec Division of Corp The Centre of Toract 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EL-SHADDAI BRILLIAN'T MINDS, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Ability Company)	
The Articles of Organization for this Limited Liability Company florida document number $\frac{1.24000090728}{1.24000090728}$.	were filed on 02/21/2024	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
CONSTANT BRILLIANT MINDS, LLC		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the a	bbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		202
Tincipal Office address MOST BE A STREET ADDRESS)		-£: -
		35 **:**
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nter new mailing address, if applicable:	<u> </u>	
Mailing address MAY BE A POST OFFICE BOX)		and page,
	: *	- '.'
		+-
. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, enter the nan	ne of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Table 1 No read Sir Col Matter Co.	
	Florida	Zin Code
	City	ZID COGE

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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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f an effe <u>Note:</u>	we date, if other than the date of filing:
e record d is fil	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 ed.
Dated _.	02/26/ 2024. Harrement
	Signature of a member or authorized representative of a member
	MARIE L CONSTANT