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	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	IP WAIT MAIL
	(Business Entity Name)
	(Document Number)
	Certificates of Status
Special Instruction	s to Filing Officer.
	Office Use Only
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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BORO BORO I	LORIDA LLC	 '
Please Debit FC	A000000003 For: ²⁵	
Thank you Seth	Nectey	
Stop/		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art, of Amend, Fite
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
,		Officer Search
4		Fictitious Search
Signature	7-/	Fictitious Owner Search
Signature		Vehicle Search
		Driving Record
Requested by:		UCC 1 or 3 File
		UCC 11 Search
Name	Date Time	UCC 11 Retrieval
Walk-In	Will Pick Lin	Courier

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: BORO BO	ORO FLORIDA LLC		
SUBJECT.	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JOHN BALLANTYNE		
		Name of Person	
	Ballantyne acctg service	Firm/Company	
	903 N PINE HILLS RD		
		Address	
	ORLANDO FL 32808	CityState and Tim Code	
	ballantyne903@gmail.com	City/State and Zip Code	
	· · · · · · · · · · · · · · · · · · ·	(to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
John Ballantyne		at (407) 765-1739	
Name o	of Person	Area Code Daytii	ne Telephone Number
Enclosed is a check for t	he 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 Addres</u> Registration (Street Address: Registration Se	ection
Division of C	lorporations	Division of Co	rporations
P.O. Box 632	: /	The Centre of	i ananassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

BORO BORO FLORIDA LLC

2024 MAR 19 AM 11: 19

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{03-18-2024}{1}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BORA BORA FLORIDA LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address 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

AGR = N	l from our records: lanager Authorized Member	n/A	
<u>itle</u>	<u>Name</u>	Address	Type of Action
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			□Remove
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Filing Fee: \$25.00