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(Red	questor's Name)	
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COVER LETTER

TO:

	Registration Sec Division of Corp			
		ARY SPECIAL LLC		
SUBJEC	T:	Name of Limit	ed Liability Company	
The enclo	osed Articles of A	Amendment and fec(s) are subm	nitted for filing.	
		ndence concerning this matter to		
		ATHALIAH DOUGHTY		
			Name of Person	
			Firm/Company	
		322 NW 3RD AVENUE		
			Address	
		DELRAY BEACH FLORI	DA 33444	
			City/State and Zip Code	
		BEARYBEARY_SPECIAL		- Continue
		Fmail address: (t	o be used for future annual report no	ouncation)
For furtl	er information c	oncerning this matter, please ca	all:	
ATHAL	JAH DOUGHT)	ı'	561 8438025 at ()	
	Name o	f Person	Area Code Dayı	ime Telephone Number
Enclose	d is a check for th	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)
	Mailing Address Registration Division of C	Section	Street Address: Registration Division of C	Section Corporations
	P.O. Box 632 Tallahassee,			f Tallahassee nroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BEARY BEARY SPECIAL LLC		
(Name of the Limited Liability Comp (A Florida Limited	nany as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number 1.24000152668	y were filed on 03/29/2024	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" o	r the abbreviation "L.L.C."
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)		
maning unaress man 122 m.		
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, <u>enter th</u>	te name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	rida
	City	7.ip Code

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>	<u>Address</u>	Type of Action
MGR	ATHALIAH DOUGHTY	322 NW 3RD AVENUE DELRAY BEACH 33444	= Add
			□Remove
			□Change
			□ Add
			Петюче
			□Change
			□Add
			□Remove
			□Change
			□Remove
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			□Remove
			☐ Change

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m effect ote: If	date, if other than the date of filing:
record s	
ated	Mala Long WAG Signature of a member or authorized representative of a member
	ATHALIAH DOUGHTY Typed or printed name of signee