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| (Requestor's Name) |
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| (Address) |
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| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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| eup we | BR(| | ments LLC | | | | | |
| SUBJEC | .1: | | | ited Liability Company | | | | |
| The enclo | osed Arti | cles of A | mendment and fee(s) are sub | mitted for filing. | | | | |
| Please ret | turn all c | orrespond | dence concerning this matter | to the following: | | | | |
| | | | Jenny C Barrientos | | | | | |
| | | | | Name of Person | | _ | | |
| | | | Jenny C Barrientos | | | | | |
| | | | | Firm/Company | | _ | | |
| | 701 vista isles dr apt 1615 | | | | | | | |
| | | | | Address | | _ | | |
| | | | Plantation 33325 | | | - | 202 | |
| City/State and Zip Code | | | | | | | | -T7 |
| | | | broainvestmentslle@gmail.c | | - | · -,- | 2024 JUN 19 | ements promise |
| For furthe | er inform | ation con | E-mail address: (i cerning this matter, please ca | to be used for future annual report notifica all: | ation) | ンカウェ | | |
| Jenny C I | Barriente | ıs | | 786 4488273 | | - 1 | 8h:11H | O |
| | | Name of F | erson | | elephone Numbe | r | ω, | |
| Enclosed | is a chec | ck for the | following amount: | | | | | |
| ■ \$ 25.0 | 00 Filing | Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified | ite of Sta | tus & | |

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

| <u>Liability Company as it now appears on our record</u> Florida Limited Liability Company) | <u>ls.</u>) |
|--|--|
| pility Company were filed on April 29, 2024 | and assigned |
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| ving: | |
| he limited liability company here: | |
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| ds "Limited Liability Company." the designation "LLC | or the abbrevia "L.L.C." |
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| vistered office address on our records, enter | the name of the new registe |
| here: | |
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| | |
| Enter Florida street addres | 53 |
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| | orida Ziv Code |
| | consistence of the designation where the designation will about the designation will be designated by the designati |

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, 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 | Luis M Perez | 701 vista isles dr plantation apt 1615 33325 FL | = Add |
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| Fective date, if in effective date is lote: If the date in | other than the da isted, the date must be iserted in this block | te of filing specific and does not m | cannot be pri | or to date of f | iling or more | than 90 days | optional after filing s, this date |) 3.) Pursuar 2 will not | nt to 605 t be list | 5.020 ted a |
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