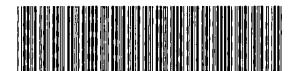
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COVER LETTER

TO: Registration So Division of Co			
	LC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ROMAN CHAIKOVSKY	I	
		Name of Person	
	Division of Corporations BROOT LLC Name of Limited Liability Company osed Articles of Amendment and fee(s) are submitted for filing. sturn all correspondence concerning this matter to the following: ROMAN CHAIKOVSKYI Name of Person Firm/Company 17980 NE 31ST CT UNIT 1115 Address AVENTURA FL 33160 City/State and Zip Code romanosik01@gmail.com E-mail address: (to be used for future annual report notification) ner information concerning this matter, please call: Chaikovskyi Name of Person Plas a check for the following amount:		
	17980 NE 31ST CT UNIT		
Division of Corporations BROOT LLC Name of Limited Liability Company he enclosed Articles of Amendment and fee(s) are submitted for filing. lease return all correspondence concerning this matter to the following: ROMAN CHAIKOVSKYI Name of Person			
	AVENTURA FL 33160		
		City/State and Zip Code	
		to Live Cities and the cities and th	(Continu)
For further information of			nication)
Roman Chaikovskyi			
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			ection
Division of C	Corporations	Division of Co	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRO O	T LLC	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000203675</u>	y were filed on 05/01/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" of	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)		FILED JUL-S PH 3:
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Floric	da
	City	Zip 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 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>	Name	Address	Type of Action
MGR	Roman Chaikovskyi	17980 NE 31ST CT #1115 AVENTURA FL 33160	= Add
			□Remove
			🗆 Add
			□Remove
			□Change
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ective date, if other than the effective date is listed, the date in te: If the date inserted in this nument's effective date on the	block does not meet the app	meable slatmory filing i	(optional) c than 90 days after filing.) Prequirements, this date wi	atsuam to 605 020°
eord specifies a delayed effect s filed.	ive date, but not an effective	e time, at 12:01 a.m. on	the earlier of: (b) The 9	Oth day after the
ed <u>MAY 15</u>	2024	-		
	de hixons	A		
	Signature of a member of a	nhonzed representative of	a member	
	11 / /			

Filing Fee: \$25.00