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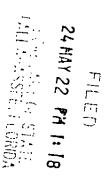
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| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

| Division of Corporations | | | |
|-------------------------------|---|---|--|
| SUBJECT: BAKER BI | .VD LLC | | |
| SUBJECT: | Name of Lim | ited Liability Company | · · |
| | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ndence concerning this matter | to the following: | |
| | Zayida Baker | | |
| | | Name of Person | |
| | BAKER BLVD LLC | | |
| | | Firm/Company | |
| | 2401 Bayshore Blvd, Unit | 1401 | |
| | | Address | |
| | Tampa, FL 33629 | | |
| | | City/State and Zip Code | |
| | z@bakerblvd.com | to be used for future annual report not | (firstion) |
| For further information e | oncerning this matter, please c | | |
| Zayida Baker | | at (813) 815-4885 | |
| Name o | f Person | at (<u>813</u>) <u>815-4885</u> Area Code Daytin | ne 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 Addres | | Street Address: | |
| Registration S Division of C | | Registration Se Division of Co | |
| P.O. Box 632 | • | The Centre of | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| DAKER BLVD LLC | - | |
|--|--|----------|
| (<u>Name of the Limited Liability Compar</u> (A Florida Limited L | ry as it now appears on our records.) lability Company) | |
| The Articles of Organization for this Limited Liability Company value of Organization for this Liability Company value of Organization for this Liability Company value of Organization for O | were filed on May 3, 2024 and assigned | ed |
| This amendment is submitted to amend the following: | | |
| A. If amending name, <u>enter the new name of the limited liabi</u> | lity company here: | |
| he new name must be distinguishable and contain the words "Limited Liabili | ty Company," the designation "L.L.C" or the abbreviation "L.L.C. | • |
| Inter new principal offices address, if applicable: | | |
| Principal office address MUST BE A STREET ADDRESS) | 24 | |
| | | |
| | 22 P | • |
| nter new mailing address, if applicable: | | <u>:</u> |
| Mailing address MAY BE A POST OFFICE BOX) | Ref. 10 Ref. 10 Ref. 10 | |
| If amending the registered agent and/or registered office a gent and/or the new registered office address here: | ddress on our records, <u>enter the name of the new re</u> | egist |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street address | |
| | | |
| - " | , Florida | |
| | | |

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> | <u>Address</u> | Type of Action |
|-------------------|-----------------------|-----------------------|----------------|
| AMBR Zayida Baker | 2401 Bayshore Blvd | □Add | |
| | Unit 1401 | ■ Remove | |
| | | Tampa, FL 33629 | ☐ Change |
| MGR Zayida Baker | 2401 Bayshore Blvd | \ Add | |
| | Unit 1401 | □Remove | |
| | | Tampa, FL 33629 | □ Change |
| AMBR Siye Baker | 5866 East Bay Blvd | | |
| | Gulf Breeze, FL 32563 | ≣ Remove | |
| | | □Change | |
| MGR Siye Baker | 5866 East Bay Blvd | | |
| | | Gulf Breeze, FL 32563 | □Remove |
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| fective date, | if other than the date of filing: |
| n effective date | is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a |
| | etive date on the Department of State's records. |
| | |
| | s a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the |
| is filed. | |
| . 111- | 22 |
| ited _Ma | y 20 |
| | 1 2 1/2 |
| | Signature of a member or authorized representative of a member |
| | Zayida Baker Typed or printed name of signee |
| | Taulda Baker |