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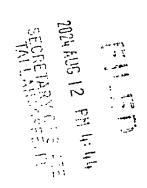
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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	CT: SOLAR BROTHERS DOCKS, LLC	
	Name of Limited Liability Company	
The enc	losed Articles of Amendment and fee(s) are submitted for filing.	
Please re	eturn all correspondence concerning this matter to the following:	
	Brian Jaundeo Name of Person	
	Solar Brother's Boat Docks Firm/Company	
	4488 East Stirley Shores RD1	north of
	TAUARES FL 32778 City/State and Zip Code	MY NUS 12 PX W. W. SECNETARY SEE ST.
	E-mail address: (to be used for future annual report notification)	一次
For furt	her information concerning this matter, please call:	
	Brian Jameson at (352) 617-5430 Name of Person Area Code Daytime Telephone Number	
Enclose	d is a check for the following amount:	
N 525	(additional copy is enclosed) Certified	e of Status &
	Mailing Address: Registration Section Street Address: Registration Section	
	Division of Corporations P.O. Box 6327 Division of Corporations The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Olar Brothe (Name of the Limited Liabili (A Florid:	ity Company as it now appears on our records.) a Limited Liability Company)	<u>-</u>
The Articles of Organization for this Limited Liability C Florida document number <u>LZH (DX) Z79_7</u> 6	Company were filed on <u>6-20-2024</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim Enter new principal offices address, if applicable:	nited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florida	Zip Code
	City	гар Соае

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>	Address	Type of Action
ANBR	Brian Jaundoo	4488 East Shirley Shores D	92 _ □Add
		Tavores FL 32778	□Remove
			T Change
AMBR_	Alonso Salazar	3306 Burnington Ct	Ç X Add
		THE WHIAges FL 32162	□Remove
			□Change
			□Add
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record sp- is filed.	ecifies a delaye	ed effective date	e, but not a	n effective t	ime, at 12:01	a.m. on the	earlier of: (b)	The 90th day afte	r the
	June	28 ^{4m}		2024	<u>l</u> .				
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Filing Fee: \$25.00