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SEURLIVARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BRKTHRU Entertainment LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
D'Andre Carver Name of Person	
BRKTHRU Entertainment LLC Firm/Company	
7318 Forest Mere Dr. Address	
Riverview/Florida/33578 City/State and Zip Code	
Entertainmentbrkthru@gmail.(om 1:-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
D'Andre Curver at (813) 416-2562 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee	tus &

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2+000349404</u>	were filed on August 9, 2024 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company bere:
The new name must be distinguishable and contain the words "Limited Liabil	
Enter new principal offices address, if applicable:	2024 5.55 7.50
(Principal office address MUST BE A STREET ADDRESS)	E SE
	<u> </u>
Enter new mailing address, if applicable:	Y OF S
(Mailing address MAY BE A POST OFFICE BOX)	FC F
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	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>	<u>Name</u>	Address	Type of Action
AMBR	Najja o Price	7318 Forest Mere Pr	□Add
		Riverview, FL. 33578 UN	(VRemove
			□ Change
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an effecti lote: If	ve date is listed, the other than the date inserted in	date must be specific	and cannot be price of meet the apple	or to date of filing or icable statutory fili	more than 90 days after	filing.) Pursuant to 605.0 date will not be listed	0207 d d as t
record s I is filed		effective date, but	not an effective	time, at 12:01 a.m	on the earlier of: (b) The 90th day after	the
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