L25000016065

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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	•;
SUBJECT: Barking Bunks	ers LLC nited Liability Company
The enclosed Articles of Amendment and fee(s) are sul	bmitted for filing.
Please return all correspondence concerning this matter	r to the following:
Alison	Debnum Name of Person
Barkin	G Bunkers LLC Firm/Company
55031	Pi++man Rd Address
Callat	City/State and Zip Code
a lison von	(to be used for future annual report notification)
For further information concerning this matter, please	
Alison Debnam Name of Person	at (978) 210-9977 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Sand Sand 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 Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section 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

Barking Bunkers LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our record Liability Company)	<u>-</u>
The Articles of Organization for this Limited Liability Company Florida document number <u>L25000016065</u>	were filed on 01/08/2025	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	
Enter new principal offices address, if applicable:		SEC. 3028
(Principal office address MUST BE A STREET ADDRESS)		AFA T
Enter new mailing address, if applicable:	same	ASSEE,
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre.	555
	, FI	lorida
	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	Peter Debnam	55031 Pittman Rd, Callahan, Florida 32011	\exists Add
			□Remove
			□Change
			□Ađd
		□Remove	
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		Remove	
			□Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: ______ (optional)
(If an 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 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated January 14 2014 Signature of a member or authorized representative of a member Peter Debnam Typed or printed name of signee

Filing Fee: \$25.00