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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : HUNTON & WILLIAMS

Account Number : I20000000236 Phone

Fax Number

: (305)810-2542 : (305)810-2460

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **B&B HAULOVER BEACH, LLC**

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C. LEWIS

JUL 8 2010

EXAMINER

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2010 JUL -7 AM 3 17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

B&B Haulo	yer Beach, LLC	IMLC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(Name of the Limited Liability Co. (A Florida Limi	mpany as it now appears sed Liability Company)	on our records.)	
(
The Articles of Organization for this Limited Liability Comp	any were filed on	5/12/2010	and assigned
Florida document numberL10000051594			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liahility company here		
The state of the little of the little of	(tarrite) company inc. c	•	
The new name must be distinguishable and end with the words "I" "L.L.C."	imited Liability Compan	y," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	2		
		<u></u>	
•			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			•
			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		r records, enter th	e name of the new
registered agent and/or the new registered office address	nere.		-
Nome of New Penistered Agents			
Name of New Registered Agent:	_ 		
New Registered Office Address:	77	r Florida street addr	
	Ente	r rioriaa sireet adar	K3'3.
_ 		, Florida	Zin Coda
	Ciru		Zon ("Arda

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	James Boucher	420 Lincoln Road Suite 265	[7] Add ∏ Remove
		Miami Beach, Florida 33139	
MGRM	Michael Boucher_	420 Lincoln Road Suite 265 Miami Beach, Florida 33139	✓ Add ☐ Remove
MGRM	Perry Boucher	420 Lincoln Road Suite 265	
		Miami Beach, Florida 33139	
MGRM	Steven Boucher	420 Lincoln Road Suite 265 Miami Beach, Florida 33139	
			Add
			Add Remove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessary	ary.)
Dated	July 7	2010	2010 ·
	b) COV C V	MS-FDC nember or authorized representative of a member	JUL-7 AHASSE
	3	FitzGerald, Authorized Representative	
		Typed or printed name of signee Page 2 of 2	STATE BRIDE
		Dir D	7

Filing Fee: \$25.00