

L12000153655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

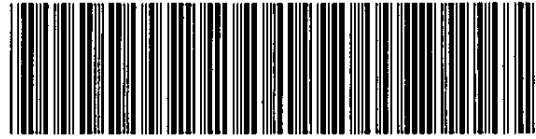
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
15 APR - 6 PM 4: 22  
NOT RETURNED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

FILED  
15 APR - 6 PM 12: 20  
DIVISION OF STATE  
TALLAHASSEE, FLORIDA

APR - 9 2015

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 577947 8042509

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE : April 6, 2015

ORDER TIME : 3:47 PM

ORDER NO. : 577947-005

CUSTOMER NO: 8042509

DOMESTIC AMENDMENT FILING

NAME: BLCS VENTURE-SANIBEL LLC

EFFECTIVE DATE:

ARTICLES OF AMENDMENT  
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
 PLAIN STAMPED COPY  
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS: \_\_\_\_\_



TIMOTHY J. MURTY, P. A.

Attorney At Law

Timothy J. Murty, Esq.  
Timmurty@islandatty.com

1633 Periwinkle Way, Suite A  
Sanibel Island, FL 33957-4404  
Office: 239-472-1000  
Fax: 239-472-4449

April 6, 2015

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

IN RE: Amendment - BLCS Venture - Sanibel, LLC

To Whom It May Concern:

I would like the Division to issue a refund in the amount of \$25.00 for the following company in connection with the filing of an amendment to the corporation.

BLCS Venture - Sanibel, LLC  
844 Lindgren Boulevard  
Sanibel, Florida 33957

Please let me know if you need any additional information

Very truly yours,

A handwritten signature in black ink, appearing to read "Timothy J. Murty", written over a horizontal line.

TIMOTHY J. MURTY  
Attorney at Law

pjm

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BLCS VENTURE - SANIBEL 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:

**MAURICE I LONG, JR.**

Name of Person

**BLCS VENTURE - SANIBEL LLC**

Firm/Company

**844 LINDGREN BLVD**

Address

City/State and Zip Code

**SANIBEL, FLORIDA 33957**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**MAURICE I LONG, JR.**

at ( **301** ) **717-9368**

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
15 APR - 8 PM 1:50  
NOT INTENDED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

April 7, 2015

CORPORATION SERVICE COMPANY  
COURTNEY WILLIAMS  
TALLAHASSEE, FL

**RESUBMIT**  
Please give original  
submission date as file date.

SUBJECT: BLCS VENTURE - SANIBEL, LLC  
Ref. Number: L12000153655

We have received your document for BLCS VENTURE - SANIBEL, LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

The effective date cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown  
Regulatory Specialist II

Letter Number: 815A00006854

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
15 APR -6 PM 12:20  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

BLCS VENTURE - SANIBEL, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/10/2012 and assigned Florida document number L12000153655.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

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

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LORI E. SCHULZ	1177 CAUSEWAY BLVD	<input checked="" type="checkbox"/> Add
		SANIBEL, FLORIDA 33957	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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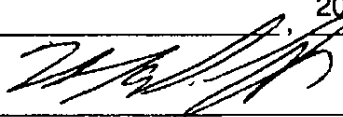
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated APRIL 3, 2015



Signature of a member or authorized representative of a member

MAURICE I. LONG, JR.

Typed or printed name of signee