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(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 7, 2018

BAY38, LLC CHRISTINA WEXLER 4160 NW 1ST AVE, BAY 38 BOCA RATON, FL 33431

SUBJECT: BAY38, LLC

Ref. Number: L15000109465

We have received your document for BAY38, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed entity was administratively dissolved, or its certificate of authority was revoked, for failure to file its 2016 annual report in a timely manner. To reinstate the entity, you must file the reinstatement, and pay the appropriate fees, online at our www.sunbiz.org. Please select 'Reinstatement' under the 'Filing Services' menu and then click on the 'File Reinstatement' button and follow the prompts. You will have the option to pay by credit/debit card; or by check or money order.

The registered agent must sign accepting the designation. Signed on Reinstatement

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.

Karen A Saly Regulatory Specialist II

Letter Number: 118A00016263

COVER LETTER

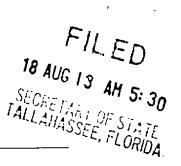
TO:	Registration Se Division of Cor						
	Bay38, LLC	•					
SURJ	ECT:	Name of Lim	ited Liability Company				
The er	nclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.				
Please	e return all correspo	ndence concerning this matter	to the following:				
		Christina Wexler					
			Name of Person				
		Bay38, LLC					
Firm/Company							
	4160 NW 1st Ave Bay38						
	Address						
		Boca Raton, FL 33431					
		bay38furniture@gmail.com	City/State and Zip Code				
		E-mail address: (to be used for future annual report no	tification)			
For fu	irther information co	oncerning this matter, please ca	all:				
Chris	tina Wexler		561 886-7040				
	Name o	f Person	at () Area Code Daytii	ne Telephone Number			
Enclos	sed is a check for th	ne following amount:					
□ \$2	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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Bay38, 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 $\frac{6/24/2015}{1}$ and assigned Florida document number ______L15000109465 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Bay38 Furniture, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 4160 NW 1st Ave Bay38 Enter new principal offices address, if applicable: Boca Raton, FL 33431 (Principal office address MUST BE A STREET ADDRESS) Bay38 Furniture Enter new mailing address, if applicable: PO Box 272141 (Mailing address MAY BE A POST OFFICE BOX) Boca Raton, FL 33427-2141 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: Christina Wexler

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

City

4160 NW 1st Ave Bay38

Boca Raton

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

. Florida 33431 Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

18 AUG 13 AH 5: 30 MGR = Manager AMBR = Authorized Member Type of Action Address <u>Title</u> <u>Name</u> □ Add _□ Remove _ Change _D Add ☐ Remove _□ Change ☐ Add □ Remove _□ Change _□ Add _□ Remove _ Change _□ ∧dd □ Remove _□ Change _□ Add □ Remove

_□ Change

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Effective date, if other than	the date of filing: _		2.70	(optional)	
fan effective date, it other than fan effective date is listed, the date Note: If the date inserted in the document's effective date on the	is block does not meet	the applicable star	attory filing requirem	ents, this date will	not be listed as
ne record specifies a dela The 90th day after the	ayed effective date record is filed.	e, but not an e	ffective time, at 1	.2:01 a.m. on	the earlier o
July 25	2	018			
Dated/	March		1.0		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00