

222000145383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

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

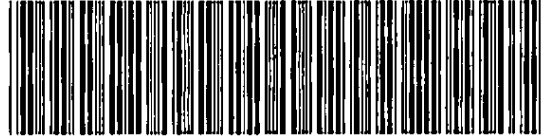
Special Instructions to Filing Officer:

J. HORNE

OCT 31 2022

10/17

Office Use Only



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07/01/22--01018--001 \*\*25.00

FILED  
2022 OCT 17 AM 11:46  
SECRETARY OF  
STATE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 3, 2022

RHONDA COOPER  
7928 LAKE NELLIE ROAD  
CLERMONT, FL 34714 US

SUBJECT: B & C PARADISE CAMP LLC.  
Ref. Number: L22000145383

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FOREIGN LLC, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Jasmine N Horne  
Regulatory Specialist II

Letter Number: 222A00022017

10/17

Note: filing fee has already been processed  
This is only to change name of manager only.  
Thank you

# COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** B & C Paradise Camp LLC.  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rhonda Cooper  
Name of Person

Firm/Company

7928 Lake Nellie Road  
Address

Clermont, FL 34714  
City/State and Zip Code

BCPARADISECAMPLLC@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rhonda Cooper at ( 352 ) 348-4900  
Name of Person Area Code & Daytime Telephone Number

**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

**Enclosed is a check for the following amount:**

- \$25 Filing Fee     \$30 Filing Fee & Certificate of Status     \$55 Filing Fee & Certified Copy     \$60 Filing Fee, Certificate of Status & Certified Copy

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: B & C Paradise Camp 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:

Rhonda Cooper  
Name of Person

member  
Firm/Company

7928 LAKE Nellie Road  
Address

Clermont, FL 34714  
City/State and Zip Code

bcparadisecampllc@gmail.com  
E-mail Address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rhonda Cooper at (352) 348-4900  
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)
- Already have*

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

FILED  
2022 OCT 17 AM 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FL

B & C Paradise Camp 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 April 15, 2022 and assigned Florida document number L22000145383

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 contain 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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Rhonda Cooper	7928 LAKE Nellie Road Clermont, Fl. 34714	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
<del>MGR</del>	<del>Rhonda Cooper</del>		<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	Rhonda Lord	7928 LAKE Nellie Road Clermont, Fl. 34714	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

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

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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 Oct. 10<sup>th</sup>, 2022.

Rhonda Cooper  
Signature of a member or authorized representative of a member

Rhonda Cooper  
Typed or printed name of signer