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(Requestor's Name)
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COVER LETTER

TO: Registration Division of C				
	relopment, LLC			
SUBJEC1:	Name of Lim	ited Liability Company		
	of Amendment and fee(s) are sub	-		
Please return all corres	pondence concerning this matter	to the following:		
	Bradford J. Nutting			
		Name of Person		
	BJN Development, LLC			
		Firm/Company	-	16 DE
	2637 E. Atlantic Blvd. ST	E 26012		16 DEC 15
		Address		5
	Pompano Beach, FL 33062	2		91 ti 16
		City/State and Zip Code		<u>+:</u>
	bjndev@gmail.com E-mail address: (to be used for future annual report notific	cation)	6
For further information	n concerning this matter, please ca	all:		
Bradford J. Nutting		321 501-9250		
Name	e of Person	at ()	Telephone Number	
•	r 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 Statu Certified Copy (additional copy is encl	
	ILING ADDRESS: stration Section	STREET/COURIE Registration Section		

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BJN Development, LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 07-01-2014	and assigned
Florida document number L14000104955	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited 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 ADDI	RESS)	3
•		8 28
		2 225
		い
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		. 5 95
		<u> </u>
		•*
B. If amending the registered agent and/or registered agent and/or the new registered office add		nter the name of the new
registered agent and/or the new registered office add	iress nere:	
Name of New Registered Agent:		
New Registered Office Address:		
<u>-</u>	Enter Florida street address	
	, Florid	
	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
MGR	Shawn Kiesling	117 Marcy Blvd.	Add
		Longwood, FL 32750	□ Remove
			Change
			Add
			□ Remove
			□ Change a
	 	□ Remove	
		□ Remove	
			Change
			□ Add
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		- 6	المُرْقِينَ الْمُرْقِينَ الْمُرْقِينَ الْمُرْقِينَ الْمُرْقِينَ الْمُرْقِينَ الْمُرْقِينَ الْمُرْقِينَ الْمُرْقِقِينَ الْمُرْقِينَ الْمُرْقِينِ الْمُرْقِيلِ لِلْمُرْقِيلِ الْمِيلِي الْمُرْقِيلِ الْمُرْقِيلِ الْمُرْقِيلِ الْمُرْقِيلِ الْمُر
		-	
Note:	e date, if other than the date of filing:	l) g.) Pursuant to 605. e will not be liste	.0207 (3)(ted as the
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m 0th day after the record is filed.	. on the earlie	er of:
	2-13		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00