L05000007205

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	İ
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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15 MAY 18 PH E: 58

T. Durah MAY 129: 2015:

TO: Registration Section **Division of Corporations** BEC Industries, LLC SUBJECT: 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: Iola J. Goeke, SPHR Name of Person BEC Consulting LLC Firm/Company 3660 Hartsfield Road Address Tallahassee, FL 32303 City/State and Zip Code igoeke@becserv.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Iola J. Goeke, SPHR Daytime Telephone Number Name of Person

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BEC Industries, LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	nny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company were filed on $\frac{01/24/2005}{\text{L05000007205}}$.		and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	pility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	3660 Hartsfield Road, Suite 121			
(Principal office address MUST BE A STREET ADDRESS)	Tallahassee, FL 32303			
		<u> </u>		
Enter new mailing address, if applicable:	3660 Hartsfield Road, Suite 121	E PH T		
(Mailing address MAY BE A POST OFFICE BOX)	Tallahassee, FL 32303			
B. If amending the registered agent and/or registered o	ffice address on our records, ente	r the name of the new		
registered agent and/or the new registered office address her				
Name of New Registered Agent:				
New Registered Office Address:				
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 agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my duties, and I an	familiar with and		

If Changing Registered Agent, Signature of New Registered Agent

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Benedict, Charles E	3660 Hartsfield Road,	□ Add
		Tallahassee, FL 32303	■ Remove
			Change
MGR	Pfeifer, Brian G., Ph.D.	3660 Hartsfield Road, Suite 121	■ Add
		Tallahassee, FL 32303	☐ Remove
			☐ Change
			Add
			Change
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f an eff Note:	ive date, if other than the date of filing: O4/24/2015 (optional continuous)	ing.) Pursua	unt to 605.02 of be listed
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.n 90th day after the record is filed.	n. on the	e earlier
Dated	ON Aneder J. J. J.		
	Signature of a member or authorized representative of a member		

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Filing Fee: \$25.00