L05000032262

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EXAMINER

65-37de2

COVER LETTER

TO: , Registration Se Division of Cor				
SUBJECT:	BAT ENTER (Name of Limite	RISES LLC ed Liability Company)		
	(
The enclosed Articles of	Amendment and fee(s) are subm	sitted for filing.		
Please return all correspo	ndence concerning this matter to	the following:		
	Steven	(Name of Person)		
		(Name of Person)		
		(Firm/Company)		
	2320	Hollywood Blu (Address)	10	•
	Houywood	(Address) FL 3302 (City/State and Zip Code)		, cjra
For further information co	oncerning this matter, please cal	l:	JUL -9	1 m.td m.td
Stever	· len	at (954) 924-460 (Area Code & Daytime Te	س— س السال الس السال السال ال	Part Part
(Name o	of Person)	(Area Code & Daytime Te	elephone Number) 074 72	
Enclosed is a check for th	ne 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

BAT	ENTERPRISE	s, L	<u>'</u>	
(Name of the Limited Liability C (A Florida Lin	Company as it now appears or mited Liability Company)	our records.)		
The Articles of Organization for this Limited Liability Cor Florida document number <u>L05000332262</u>	· •	4/1/05	, and assigr	ned
Piorida document number 20300036767	·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	ed liability company here:			
BAT ENTERPRISES & The new name must be distinguishable and end with the words	INVESTMENTS	LLC		
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company,"	the designation "	LLC" or the abb	reviation
Enter new principal offices address, if applicable:			法的旨	مكاملادا دي محمد و
(Principal office address MUST BE A STREET ADDRE	<u></u>		6	<u> </u>
	 		73//	عنامهای ا کنور ب _ا
Enter new mailing address, if applicable:			2:52	
(Mailing address MAY BE A POST OFFICE BOX)	<u>.</u> .		Ĭ.w.	
	 			
B. If amending the registered agent and/or registered registered agent and/or the new registered office addre		records, enter	the name of t	he new
Name of New Registered Agent:			* = ·	
New Registered Office Address:				
	(Enter Florida street address)			
<u> </u>		, Florida		<u>.</u>
	(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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	nager Nanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
		######################################	Add Add Remove
D. If amen	ding any other information, enter change(s	here: (Attach additional sheets, if necessary.)	TE
			
_			_
Dated			
		authorized representative of a member Publication Printed name of signee	

Page 2 of 2

Filing Fee: \$25.00