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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e#)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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PENGLE LEB TO 5012

BWB INVESTMENTS, LLC

TELEPHONE (813) 224:9100 +

625 E TWIGGS STREET, SUITE 100 TAMPA, FL 33602 FACSIMILE (813) 224-9109

February 6, 2015

By Certified Mail:

No. 91 7199 9991 7035 1272 5644

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

Re:

BWB Investments, LLC

Dear Sir or Madam:

This letter concerns the above referenced matter. Attached is John Bales Attorneys' check number 33736, in the amount of \$30.00, made payable to the Florida Department of State.

The attached check provides payment for the Filing Fee and Certificate of Status Fee associated with the attached Articles of Amendment to Articles of Organization of BWB Investments, LLC.

If you have any questions or comments, please email or call me.

Sincerely,

John Bales

Managing Member

JCB/mjj

COVER LETTER

TO: Registration Section Division of Corporation			
BWB Inves	stments, LLC		
SUBJECT:	Name of Limit	ed Liability Company	
The enclosed Articles of Art	nendment and fee(s) are subn	nitted for filing.	
Please return all corresponde	ence concerning this matter to	o the following:	
	John Bales		
		Name of Person	
	BWB Investments, LI	_C	
		Firm/Company	
	9700 Dr. Martin Luthe	er King Jr., St. N., Sui	te 400
		Address	
	St. Petersburg, FL 33	3702	
		City/State and Zip Code	
<u>:</u>	jbales@johnbales.cor		
	E-mail address: (to	be used for future annual repo	rt notification)
For further information cond	erning this matter, please ca	11:	
Matthew Jacobs		727 823-9	9100
Name of Pe	erson		aytime Telephone Number
Enclosed is a check for the f	following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Section 1 \$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

BWB Investments, LLC		
(Name of the Limited	Liability Compar	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liab Florida document number <u>L05000118184</u>		
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of t	he limited liabi	ility company here:
The new name must be distinguishable and end with the wo	ords "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		9700 Dr. Martin Luther King Jr., St. N.,
(Principal office address MUST BE A STREET ADDRESS)		Suite 400
		St. Petersburg, FL 33702
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		9700 Dr. Martin Luther King Jr., St. N., Suite 400
		St. Petersburg, FL 33702
B. If amending the registered agent and/or registered agent and/or the new registered office	ce address here	ffice address on our records, enter the name of the new
Name of New Registered Agent:	John Bales	
New Registered Office Address:	9700 Dr. Ma	artin Luther King Jr., St. N. Suite 400
Now Degictored Agent's Signature if showing De	St. Petersbu	
New Registered Agent's Signature, if changing Reg	gistered Agent:	Ž»

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	David B. Weinstein	625 E. Twiggs St., Suite 100	□ Add
		Tampa, FL 33602	■ Remove
MRG	Tracy F. Bales	9700 Dr. Martin Luther King Jr., St. N.,	= Add
		Suite 400	□ Remove
		St. Petersburg, FL 33702	
			□ Add
			_ □ Remove
			Add
		20 30 20 30 20 30 30 30 30 30 30 30 30 30 30 30 30 30 30 30 30 30 30 30 30 30 30 30 30 30 30 3	B C C
			_□Add
			_ _□ Add
			_□ Remove

If amending	g any other information, enter change(s) here: (Attach additional	sheets, if necessary.)
•		
		
		
Effective da	ate, if other than the date of filing: date must be specific, cannot be prior to date of receipt or filed date and cannot be mo	(optional)
	document is filed by the Florida Department of State)	re man 90 days after
Dated	2.6.2015	
_	()AAA-	
	Signature of a member or authorized representative of a	member
<u>J</u>	John Bales	
_	Typed or printed name of signed	

Page 3 of 3

Filing Fee: \$25.00

APPENDING TO ARE STATED.