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## **COVER LETTER**

	c Development LLC		
SUBJECT:	Na	me of Limited Liability Company	
The enclosed Arti	icles of Amendment and fee(s	s) are submitted for filing.	
Please return all c	correspondence concerning th	is matter to the following:	
	Brian A. Smith		
		Name of Person	<del>, , ,</del>
	Brac Developmer	nt LLC	
		Firm/Company	
	325 Jasmine Aver	nue	
		Address	<del></del>
	Orlando Florida	32806	
		City/State and Zip Code	
	bsmith@bracdevel	opment.com address: (to be used for future annual report notif	ication)
For further inform	nation concerning this matter.		,
Brian A. Smith		407 468-9137	
	Name of Person	at ()	: Telephone Number
Enclosed is a chee	ck for the following amount:		
□ \$25.00 Filing	; Fee \$30.00 Filing F Certificate of		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing	Address:	Street Address:	

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

TO:

Registration Section
Division of Corporations

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

Brac Development 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 1/10/2006 Florida document number L0600003045 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A 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

## 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.

City

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
			□ Add
			□Remove
			Il Change
*******			□Add
	•		□Remove
			□Change
			□Add
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			□Change
			□Add
			□Remove
			□ Change
			□Add
		-11	EJRemove
			□Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	$\Lambda$ ) $I$ $I$
lf an ef <u>Note:</u>	tive date, if other than the date of filing:
e reco	rd 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 iled.
Dated	12/4/2019
	Signature of a member or authorized representative of a member
	Brian A. Smith
	Typed or printed name of signee