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B. BOSTICK

APR 2 5 2011

EXAMINER

COVER LETTER

10:	Registration S Division of Co	Section Proprations		
SUBJE	; ··	·	BMC,LLC •	
		Name of Lim	ited Liability Company	-
The end	closed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please r	eturn all corresp	ondence concerning this matte	r to the following:	
			Stephanie McDonald	_
			Name of Person	
			BMC,LLC	
			Firm/Company	
			702 137th Street NE	
-			Address	
•			Bradenton, FL 34212	
			City/State and Zip Code	TELVI A
•		E-mail address:	A2002@tampabay.rr.com to be used for future annual report notification)	APR 2
For furt	her information	concerning this matter, please	eali:	
	Step	hanie McDonald	at (_941_)928-3937	FLORE 2:
	Name	of Person	Area Code & Daytime Telephone Num	FLORIDA
Enclose	ed is a check for	the following amount:		
\$ 25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Certification (additional copy is enclosed) Certification	Filing Fee, icate of Status & ied Copy ional copy is enclosed)
	Regis Divis P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, 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

(Name of the Limited Liability (A Florida L	BMC,LLC Company as it now appea imited Liability Company)	urs on our records.)		
The Articles of Organization for this Limited Liability Co Florida document number	ompany were filed on	04/24/2006	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability company he	<u>re</u> :		
The new name must be distinguishable and end with the word "L.L.C."	ls "Limited Liability Comp	any," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable:			TAO: 1	
(Principal office address MUST BE A STREET ADDRE	ESS)		5 B	
Enter new mailing address, if applicable:			22 TH	
(Mailing address MAY BE A POST OFFICE BOX)			ANE DA	
B. If amending the registered agent and/or registered agent and/or the new registered office addresses		our records, <u>ente</u>	r the name of the new	
Name of New Registered Agent:				
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 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Massaging Member being added or removed from our records:

MGR = Manager * MGRM = Managing Member					
<u>Title</u>	Name	<u>Address</u> <u>Ty</u>	pe of Action		
MGRM	Leroy W. McDonald jr.		Add Remove		
			Add Remove		
			Add Remove		
			Add Remove		
•			Add Remove		
			Add Remove		
D. If amend	ing any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary.)	The same of		
		STEED TO STE	RZ2 PH 3		
Dated	April 18 ,,	2011 .	- ·		
		mber or authorized representative of a member Stephanie McDonald BMC LLC, MGRM yped or printed name of signee	- -		

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Filing Fee: \$25.00