L06000044159

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		,

Office Use Only



000263494490

000263494490 08/25/14--01052--020 **25.00

14 AUG 25 PM 4: 34

9/14/14

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Big Bryce & Name of I	Herphsus LUC Limited Dability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cl	nange and fee(s) are submitted for filing.
Please return all correspondence concerning this mat	tter to the following:
Byron Gardiner Name of Person	-
Blu Matri	***************************************
477 S. Rosinary P	we #309
West Palm Beach, Fi City/State and Zip Code	33401
Amy @ bluewartinilo E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, pleas	e call:
Byron Gardi ner at a	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	i ananassee, Fiorida 52514
Enclosed is a check for the following amou	ınt:
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>Bia</u>	Bruce	Enterp	nses, L	ic_
(Name of the Limi	ed Liability Compa (A Florida Limited I	ny as it now appears (Liability Company)	on our records.)	
The Articles of Organization for this Limited L Florida document number		were filed on	127/06	and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company hero	<u>2</u> :	
The new name must be distinguishable and end with the	words "Limited Liab	îlity Company," the de	signation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	5551	Largo De	1 501 Dr.
(Principal office address MUST BE A STREE	T ADDRESS)	Lake	both Fe	33449
Enter new mailing address, if applicable:				TA AU
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>			3 25 PH
B. If amending the registered agent and/ registered agent and/or the new registered of			our records, <u>ente</u>	er the name of the ner
Name of New Registered Agent:	Byr	on Gar	diner	
New Registered Office Address:	477	S. Rusery Enter Floride	ary Ave	#309
	West P	alm Bead	, Florida	93401
	•	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 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.

Page 1 of 3

Changing Degreed Agent, Signature of New Registered Agent

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

MGR = M $AMBR = A$	lanager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
····			
			□ Remove
			□ Add
			Remove
			AUG 25
			AMG 25 AHASSE
			LOR LOR
			□ Remove
			, □ Add
J			□ Remove

,		· · · · · · · · · · · · · · · · · · ·		
	ner than the date of filing: e specific, cannot be prior to date		d cannot be more than 90 d	ptional) ays after
late this document is	filed by the Florida Department of	of State)	d cannot be more than 90 d	ptional) ays after
		of State)	d cannot be more than 90 d	p tional) ays after
ate this document is	filed by the Florida Department of	of State)	d cannot be more than 90 d	ptional) ays after

Page 3 of 3

Filing Fee: \$25.00

14 AUG 25 PH 4: 34