

L07000631155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

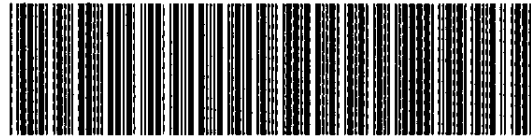
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 18 PM 2:56

T. HAMPTON

OCT 19 2010

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BWR Master, L.L.C.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maureen Gardiner

Name of Person

BWR Master, L.L.C.

Firm/Company

14 SE 4th Street

Address

Boca Raton, FL 33432

City/State and Zip Code

reenie@rlcarchitects.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maureen Gardiner

Name of Person

at (561)

393-6555

Area Code & Daytime Telephone Number

Enclosed is a check for the 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)

Sent previously

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

October 13, 2010

Tammy Hampton
Regulatory Specialist II
Florida Department Of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RE: BWR Master, LLC
Ref. Number: L07000031155

Dear Ms. Hampton:

Per your letter of October 7, 2010 and our telephone conversation of this morning, I have enclosed an Articles Of Amendment To Articles Of Organization form for the purpose of changing the principal office and mailing address of the above referenced.

A copy of your letter of October 7, 2010 and the previous incorrectly submitted form are enclosed for your reference.

Thank you for your help.

Sincerely,

A handwritten signature in black ink, reading "Maureen A. Gardiner". The signature is fluid and cursive, with the first name "Maureen" and last name "Gardiner" clearly legible.

Maureen A. Gardiner
Financial Manager

MAG
Enclosures



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

10 OCT 18 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

October 7, 2010

MAUREEN GARDINER
14 SE 4TH ST
BOCA RATON, FL 33432

SUBJECT: BWR MASTER, LLC
Ref. Number: L07000031155

We have received your document for BWR MASTER, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The new registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 510A00023826

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BWR Master, L.L.C.

(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 03/22/2007 and assigned
Florida document number L07000031155.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with 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)

14 SE 4th Street

Boca Raton, FL 33432

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

14 SE 4th Street

Boca Raton, FL 33432

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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:

N/A

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 Managing Member being added or removed from our records:

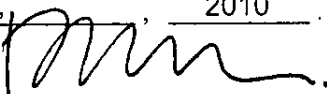
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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Dated October 13, 2010



Signature of a member or authorized representative of a member

Bruce W. Retzsch

Typed or printed name of signee