L07000/18499

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	(Address)
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	(City/State/Zip/Phone #)
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	(Document Number)
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COVER LETTER

TO: Registration Sec Division of Corp				•	
CAID FECT.	BDBC Cons	truction Group L	IC :	•	
SUBJECT:		ted Liability Company		<u> </u>	
The enclosed Articles of A	Amendment and fee(s) are sub				
Please return all correspon	ndence concerning this matter	to the following:		•	
		Nathan Becton			
÷ .	·	Name of Person	* * * * * * * * * * * * * * * * * * * *	,	
	- ·	<u>.</u>	• •		
	BDBC	Construction Grou	up LLC	÷	
		Firm/Company			
		-	- # •		•
		2003 E Caracas S	it :		
		Address			
	· • · · · · · · · · · · · · · · · · · ·				-
		Tampa, FL 33610			
-		City/State and Zip Code	*	<u> </u>	
<u>.</u>	bdbc	construction@gma	il.com i		[7]
	E-mail address: (to be used for future annual	report notification)		
For further information co	oncerning this matter, please o	all:			
Nat	han Becton	at (813)	728-911	8 -	
Name of	Person		le & Daytime Telephone	Number	
		•			
•	•		· · · · · · · · · · · · · · · · · · ·		
Enclosed is a check for th	e following amount:		, 1	· · · · · · · · · · · · · · · · · · ·	•
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee Certified Copy (additional copy	is enclosed)	0.00 Filing Fee, Certificate of Status & Certified Copy additional copy is encl	losed)
		•			-,
Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	Registra Division Clifton	CT/COURIER ADDR ation Section n of Corporations Building secutive Center Circle		
Tanana	, , , , , , , , , , , , , , , , , , ,		ssee, FL 32301		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BDBC Co	nstruct	ion Gro	oup LLC	;·			
(Name of the Limited Liability (A Florida	Limited L	iy as it no iability Co	w appears (mpany)	on our rec	ords.		
The Articles of Organization for this Limited Liability	Company	were filed	l on	11/28/2	007	and ass	signed
Florida document number L07000118499				•			
			•	:			
This amendment is submitted to amend the following:			**	:			
A. If amending name, <u>enter the new name of the lin</u>	nited liabi	ility_comp	oany here:	ŧ	-		
				1 .			
The new name must be distinguishable and end with the wo	ords "Limit	ted Liabili	ty Company	," the desig	gnation "LLC	" or the	abbreviatio
Enter new principal offices address, if applicable:	•			-		2310	·
(Principal office address MUST BE A STREET ADD	RESS)			·	2.5		"77
ç			, <u></u>		65	<u>n</u>	MATTER STATE
•	* 1	: .		t	W ₂	P	11
Enter new mailing address, if applicable:				:	5	بن ۔	
(Mailing address MAY BE A POST OFFICE BOX)	٠.				器科	යා හෙ	
			•				,
B. If amending the registered agent and/or registered agent and/or the new registered office add			ess on ou	r records,	enter the	name o	of the ney
Name of New Registered Agent:							
New Registered Office Address:							
			Enter	r Florida s	treet addres:	5	
		•	·	. Fla	orida	•	
		·City				Zip Code	е

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 = Mana MGRM = Mar	ger naging Member			
Title	Name		Address	Type of Action
MGRM	Tennikay M Sayeh		2003 E Caracas St	Add
· . · . ·			Tampa, FL 33610	_ Remove
MGRM	Nathan Becton		2003 E Caracas St	Add □ Remove
	•		Tampa, FL 33610	- Remove
· · · · · · · · · · · · · · · · · · ·			THE PARTY OF THE P	Add Remove
			The state of the s	5
			1. 17 Ann	Add T
]3: 0 8
-				Add Remove
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				Kemove
D. If amendin	g any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	
			i.	
· · · · · · · · · · · · · · · · · · ·				- .
• •				
Dated	Mostim	1 10		•
	·	Na	authorized representative of a member	·

Page 2 of 2

Filing Fee: \$25.00