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(Requestor's Name)					
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(City/State/Zip/Phone #)					
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(Business Entity Name)					
(Document Number)					
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Special Instructions to Filing Officer:

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NOV -3 2010

EXAMINER

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2010 NOV -1 PM JE J. SECRETARY OF STATE

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:	BDBC Cons	truction Group LLC			
SCHOOL		ted Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:		2018 NOV -1 PH 1: 11	-
			•	1 S	ا
		Nathan Becton		る話し	٢
		Name of Person		SEE SEE	Ţ
BDB0		Construction Group LLC		FICE	,
		Firm/Company			
		2003 E Caracas St		•	
		Address			
		Tampa, FL 33610			
,		City/State and Zip Code			
	bdbc	construction@gmail.com			
	E-mail address: (to be used for future annual report noti	fication)		
For further information	concerning this matter, please of	eall:			
Na	athan Becton	at (813)	728-9118		
Name of Person		Area Code & Daytin	ne Telephone Number	•	
Enclosed is a check for	the following amount:				
		Tree on Eiling For Pr	\$60.00 Fil	ing Ess	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	Certifica d) Certified	te of Status &)
	LING ADDRESS:		IER ADDRESS:		
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. I	3ox 6327	Clifton Building			
Tallah	nassee, FL 32314	2661 Executive C	enter Circle		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BDBC Const	<u>ruction Group L</u>	<u>LC</u>	
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appeated Liability Company)	ers on our records.)	
The Articles of Organization for this Limited Liability Com			and assigned
Florida document numberL07000118499			
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited</u>	l liability company he	<u>re</u> :	
			2011 SE TALI
The new name must be distinguishable and end with the words 'L.L.C."	'Limited Liability Comp	pany," the designation "l	LLC3 on the breviation
			IAR ASS
Enter new principal offices address, if applicable:			
<u>(Principal office address MUST BE A STREET ADDRES</u>	<u></u>		
			STATE ORIGINA
			60
Enter new mailing address, if applicable:	2780 E Fow	ler Ave	
(Mailing address MAY BE A POST OFFICE BOX)	Ste 247		
	Tampa, FL 3	33612	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		our records, enter	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ε	nter Florida street add	iress
		, 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 **Type of Action Address** Title **Name MGRM** Becton, Nathan 2003 E Caracas St ☐ Add Tampa, FL 33610 ✓ Remove Greene, D.J. MGRM 2003 E Caracas St Tampa, FL 33610 MGRM. Kennedy, Ethan 2003 E Caracas St Tampa, FL 33610 Earl Bunch MGRM **✓** Add 2003 E Caracas St Remove Tampa, FL 33610 MGRM Craig Becton ✓ Add 2003 E Caracas St Tampa, FL 33610 Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated authorized representative of a member Nathan Becton

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00