## L0800001519

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T. HAMPTON

## **COVER LETTER**

TO:

Registration Section • Division of Corporations

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**B&K ERA, LLC** 

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:

## Khalid Benkerroum

Name of Person

b&k era llc

Firm/Company

902 E Busch Blvd

Address

**Tampa FI 33612** 

City/State and Zip Code

noregretman@msn.com

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

For further information concerning this matter, please call:

khalid

813<sub>546</sub> 0239

Name of Person

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)

**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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DEC 26 PH 2; 5

**B&KERALLC** 

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Fi	orida Limited Liability Company)	الله الله
The Articles of Organization for this Limited Liabseller Florida document number L08000091519	ility Company were filed on 9/16/2008	and assigned
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Company," the design	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO		
B. If amending the registered agent and/or registered agent and/or the new registered office	•	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	treet address
	**************************************	orids
	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, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGR	Bouchaib Tounsi	902 E Busch BLVD TAMPA FL 3361	2 🚺 Add
			Remove
			AddRemove
			Add
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			E PH 2: 5
<del></del>			Add
		· · · · · · · · · · · · · · · · · · ·	. Add
	`		Remove

D.	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	• • •
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Da	ted <u>December 20th</u> , 2012.
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	KNALID BENKERROOM
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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