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TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

BAYFRONT MANAGEMENT GROUP, LLC SUBJECT: 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: RODNEY CHERFILS Name of Person Firm/Company 426 NW 155TH LN APT 426 Address MIAMI, FL 33169 City/State and Zip Code RODNEYCHERFILS45@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RODNEY CHERFILS Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$60.00 Filing Fee. □ \$30,00 Filing Fee & □ \$55,00 Filing Fee & ■ \$25.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) **Mailing Address:** Street Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ARTICLES OF ORGANIZATION OF ANAGEMENT GROUP, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) (A Florida Limited Liability Company)

BAYFRONT MANAGEMENT GROUP, LLC

he Articles of Organization for this Limited Liability Company	were filed on $\frac{03/17/2009}{}$ and assigned			
orida document number L09000025761				
nis amendment is submitted to amend the following:				
If amending name, enter the new name of the limited liab	ility company here:			
ne new name must be distinguishable and contain the words "Limited Liabi	in Company of the com			
e new name must be distinguishable and contain the words "Limited Liabi				
nter new principal offices address, if applicable:	4850 W Oakland Park Blvd Suite 209			
Principal office address MUST BE A STREET ADDRESS)	Lauderdale Lakes, FL 33313			
nter new mailing address, if applicable:	4850 W Oakland Park Blvd Suite 209			
Mailing address MAY BE A POST OFFICE BOX)	Lauderdale lakes, FL 33313			
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If any discrete majorand and and any any interest of the	ddays ar an annade antartha nama of the raw ravia			
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new regis			
	address on our records, enter the name of the new regis			
	address on our records, enter the name of the new regis			
Name of New Registered Agent:	address on our records, enter the name of the new regis			
gent and/or the new registered office address here:	address on our records, enter the name of the new register. Enter Florida street address			
Name of New 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.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Kelly Chertils	20341 NE 14 AVE	≡ Add
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