109000042495

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SECRETARY OF STATE

K.SALY EXAMINER AUG 182015

COVER LETTER

	Registration Sec Division of Corp			
eno iez		L ESTATE LLC		
SUBJEC	- ! :	Name of Lim	ited Liability Company	
The encl	osed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspon	dence concerning this matter	to the following:	
		DAVID P. BARLEY, SR.		
			Name of Person	
		BMW REAL ESTATE LE	.C	
			Firm Company	
		5150 BELFORD ROAD. I	BUILDING 400	
			Address	
		JACKSONVILLE, FLOR	IDA 32256	
		DBARLEY@BMWCPA.C	City/State and Zip Code OM	-
		E-mail address: (to be used for future annual report notif	ication)
For furth	er information co	ncerning this matter, please ca	all:	
DAVID	P. BARLEY, SR		904 694-4272 at ()	
	Name of	Person	at () Area Code Daytime	: Telephone Number
Enclosed	l is a check for the	e following amount:		
\$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy radditional 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**

	FI	ED
2015	106 10	
SECRIL	AAR TO	PM 2:4
-7377,	$4SSF_{\mathbf{r}}^{U}$	STATE

BMW REAL ESTATE LLC

(A Florida L	imited Liability Company)	ASSEE, FLORIDA
The Articles of Organization for this Limited Liability Cor Florida document number <u>L09000042495</u>	mpany were filed on MAY 1, 2009	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u>(SS)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe registered agent and/or the new registered office addre Name of New Registered Agent:		enter the name of the n
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	Flori	da
	City	da 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 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 Changing Registered Agent, Signature of New Registered Agent

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
MGRM	SAM F. MARTIN	112-C 7TH AVE. S.	
		Jacksonville Beach, FL 32250	■ Remove
			_ Change
		· · · · · · · · · · · · · · · · · · ·	□ Add
			☐ Remove
			☐ Change
			Change Change
			Dehange DEAdd
			□ Remove
			□ Change
			□ Add
			□ Remove
			□ Change
		MARK CO.	
			□ Remove
			□ Change

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		TOIS AUS 10 PH 2: 44 SEUTETATE OF STATE PALL HASSEE. FLORID
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	4-1-, 4-14 4-14 4-14 1-14 1-14 1-14 1-14 1-14 1-14 1-14 1-14 1-14 1-14 1-14 1-14	
<u></u>	4	***
fective date, if other than	the date of filing:	(optional)
ote: If the date inserted in th.	must be specific and cannot be prior to date of filing s block does not meet the applicable statutory e Department of State's records.	(optional) g or more than 90 days after filing.) Pursuant to 605.0207 (filing requirements, this date will not be listed as t
e record specifies a dela The 90th day after the	yed effective date, but not an effecti record is filed.	ive time, at 12:01 a.m. on the earlier of:
nted	2015	
0 00	2111	
		uative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00