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PICK-UP WAIT	MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of S	Status		
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G. MCLEOD

JAN 1 9 2012

EXAMINER



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COVER LETTER

TO: Registratio Division of	on Section Corporations		
SUBJECT:	BBJ ENVIF	RONMENTAL LLC	
	Name of Limi	ted Liability Company	
The enclosed Article	es of Amendment and fee(s) are sub	· emitted for filing.	
Please return all corr	respondence concerning this matter	to the following:	
		ROBERT BAKER	
		Name of Person	
		Firm/Company	
	6321 F	PELICAN CREEK CIRCLE	
		Address	
	RI	VERVIEW, FL 33578	
		City/State and Zip Code	
	E-mail address: (t	ER@BBJENVIRO.COM obe used for future annual report notifica	tion)
For further information	on concerning this matter, please ca	all:	
	ROBERT BAKER	at (813) 2' Area Code & Daytime T	
Ivai	the of Person	Area Code & Daytime	elephone Number
Enclosed is a check f	or 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

BBJENV	IRONMENTAL LLO		
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appea Limited Liability Company)	rs on our records.	
The Articles of Organization for this Limited Liability C	ompany were filed on	06/05/2009	and assigned
Florida document numberL000055216	 •		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ited liability company he	<u>re</u> :	
BBJ LI	QUIDATION LLC		
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Compa	any," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	(ESS)		7
			AM A THE
			SS = S
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			8 A 2
	1 65 13		>
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		our records, <u>enter</u>	tne name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	- 470 - mirror	, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager

<u> Title</u>	<u>Name</u>	Address	Type of Actio
			Add Remove
			Add Remove
			Add Remove
 			Add Remove
			Add Remove
			Add Remove
. If amendi	ing any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	_
	•		_
_			_
Dated Jan	mary 17 , 20,	5 BM	
•	Signature of a member	or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00