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EXAMINER

## **COVER LETTER**

**Registration Section** 

Tallahassee, FL 32314

TO:

Division of Corporations
SUBJECT: Bridgepoint Real Estate Group, 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:
Dennifer Hendrick Name of Person
Dridgepoint  Firm/Company
Bridgepoint  Firm/Company  101 NE 3rd Ave Suite# 1830
Fort Lauderdale, FL 33301  City/State and Zip Code  Jennifer. Hendrick @ bridgepoint - Ventures. com  E-mail address: (to be used for future annual report notification)
Jennifer. Hendrick @ bridgepoint - Ventures: (om E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dava Munach at (954) 214-7570  Name of Person  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$\$\$\$\$\$\$\$ (additional copy is enclosed)\$
MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

(A Florida I	Emmed Emonity Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 66	29 2009 and assigned
Florida document number <u>L0900056</u>		
Tional document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the wor	rds "I imited I jability Company	," the designation "LLC" or the abbreviatio
"L.L.C."	ids Elimica Elacinity Company	
77		
Enter new principal offices address, if applicable:	<del></del>	167 O
(Principal office address MUST BE A STREET ADDR	<u>RESS)</u>	Table 1
•		<u> </u>
		그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
Enter new mailing address, if applicable:		**************************************
(Mailing address MAY BE A POST OFFICE BOX)		
william in the second s	/	
	/	
B. If amending the registered agent and/or registered	tered office address on our	r records enter the name of the nes
registered agent and/or the new registered office add		records, enter the name of the nev
Name of New Registered Agent.		
Name of New Registered Algeria.		
New Registered Office Address:		
	Enter Florida street address	
		, Florida
_	City	Zip Code
New Registered Agent's Signature, if changing Registere	d Agent:	
•	<del>_</del>	

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 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 **Address Title** <u>Name</u> Type of Action Fort Landerdale, FL 3330 Remove David JamesHolt ☐ Add Remove Remove ]:Add Remove ∏Ædd Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2010 Dated Signature of a member or authorized representative of a member ana Munau Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00