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J. SAULSBERRY EXAMINER

MAY 1 2012

COVER LETTER

`:	Best Bay					
-		Properties, LLC				
	Name of Limit	ed Liability Company				
ed Articles of A	Amendment and fee(s) are sub	mitted for filing.				
m all correspor	ndence concerning this matter	to the following:				
		Stephen Furber				
		Name of Person				
	Bes	st Bay Properties, LLC				
		Firm/Company				
	10	12 Soindle Palm Way		a i '		
		Address		28	2012	
	Ar	volla Basch, El 33573	:	A	APR	ال.
		City/State and Zip Code		ARY	30	
sfurber@bestbayproperties.com					n	
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Name of	Person	Area Code & Daytime	Telephone Number			
a check for the	e following amount:					
Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificat) Certified	e of Status Copy		d)
	information co	Bes	Best Bay Properties, LLC Firm/Company 1012 Spindle Palm Way Address Apollo Beach, FI 33572 City/State and Zip Code sfurber@bestbayproperties.com E-mail address: (to be used for future annual report notifit information concerning this matter, please call: Steve Furber Name of Person a check for the following amount: Filing Fee \$\text{State} \text{Stoop Filing Fee & Certified Copy (additional copy is enclosed)} MAILING ADDRESS: STREET/COURID	Stephen Furber Name of Person Best Bay Properties, LLC Firm/Company 1012 Spindle Palm Way Address Apollo Beach, FI 33572 City/State and Zip Code sfurber@bestbayproperties.com E-mail address: (to be used for future annual report notification) information concerning this matter, please call: Steve Furber at (813) At 22-5600 Name of Person Area Code & Daytime Telephone Number a check for the following amount: Filing Fee \$30.00 Filing Fee & Certified Copy (additional copy is enclosed) Certificate (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS:	Stephen Furber Name of Person Best Bay Properties, LLC Firm/Company 1012 Spindle Palm Way Address Apollo Beach, FI 33572 City/State and Zip Code sfurber@bestbayproperties.com E-mail address: (to be used for future annual report notification) information concerning this matter, please call: Steve Furber at (813) Area Code & Daytime Telephone Number a check for the following amount: Filing Fee Scertificate of Status Certificate of Status MAILING ADDRESS: STREET/COURIER ADDRESS:	Stephen Furber Name of Person Best Bay Properties, LLC Firm/Company 1012 Spindle Palm Way Address Apollo Beach, Fl 33572 City/State and Zip Code Sfurber@bestbayproperties.com E-mail address: (to be used for future annual report notification) information concerning this matter, please call: Steve Furber Name of Person at (813) 422-5600 Area Code & Daytime Telephone Number a check for the following amount: Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Best Bay P	Properties, LLC	* \	<u> </u>	
(Name of the Limited Liability Con (A Florida Limit	npany as it now appear ed Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Comp	any were filed on	09/18/2009	and assigne	ed
Florida document numberL0900090592				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited l	liability company her	re:		
The new name must be distinguishable and end with the words "L" "L.L.C."	imited Liability Compa	nny," the designation "L	LC" or the abbro	eviation
Enter new principal offices address, if applicable:			202 202 202 203 203 203	
(Principal office address MUST BE A STREET ADDRESS	2		A A B B B B B B B B B B	7)
			SET 3	=
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered	office address on o	our records, <u>enter t</u>	he name of th	ie new
registered agent and/or the new registered office address l	<u>nere</u> :			
Name of New Registered Agent:				
New Registered Office Address:				
	Ent	ter Florida street addi	ress	
	City	, Florida	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

MGRM	1 = Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
			Add Remove
	·		
			Add Remove
	·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·		
	<u> </u>		AddRemove
D. If ar	mending any other information, enter FEI/EIN Number is changed as	change(s) here: (Attach additional shee	
	27-0953503		FIL 2017 APR 30 ALLAHASSEL
			M & 12
Dated _	April 26	<u>2012</u> .	, , , , , , , , , , , , , , , , , , ,
	Signature of a r	nember or authorized representative of a me	mber
		Stephen Furber	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00