L09000117411

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B. BOSTICK
AUG 1 9 2011
EXAMINER

COVER LETTER

SUBJECT:	BNB MANAG	EMENT GROUP LLC)			
SUBJECT.		ited Liability Company	·			
	mendment and fee(s) are su	_				
		Kaari Gagnon, Esq.		_		
•	Name of Person Zarco, Einhorn, Salkowski & Brito, P.A.					
				_		
	Firm/Company					
	100 S.E. 2nd Street, Suite 2700					
	Address			•		
		Miami, FL 33131		_ B on	numeric .	
		City/State and Zip Code		E GIK		A servicitor
	Kg F-mail address: t	agnon@zarcolaw.com to be used for future annual report r	notification)		<u>:</u>	4 P P P P P P P P P P P P P P P P P P P
For further information cor	ncerning this matter, please	•	·	SS -	යා	Parthasi E Famous
To Talmer mornation co.	neering and matter, prease t	suit.		. <u> </u>		, 4 g
	ri Gagnon	at (305)	374-5418 ytime Telephone Number) (S) (S)		
Name of F	Person	Area Code & Day	time Telephone Number	r Dm		
Enclosed is a check for the	following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	osed) Certified	ate of Stat		sed)
MAILIN	G ADDRESS:	STREET/COU	URIER ADDRESS:			

Registration Section

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

Registration Section Division of Corporations

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BNB MANAGEME	NT GROUP LLC		
(Name of the Limited Liability Compa (A Florida Limited)	nny as it now appears on our records. Liability Company)	i	
The Articles of Organization for this Limited Liability Company	and assigned		
Florida document numberL09000117411			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designatio	n "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	318 South U.S. Highway 1		
(Principal office address MUST BE A STREET ADDRESS)	Suite 210		
	Jupiter, FL 33477	<u> </u>	
Enter new mailing address, if applicable:	318 South U.S. Highway 1	HAUG	
(Mailing address MAY BE A POST OFFICE BOX)	Suite 210	SSE CO PROPER	
	Jupiter, FL 33477		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		er the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street	address	
	, Florida <i>City</i>	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Title Name Address Type of Action MGRM** Ronald Garcia 1766 Bay Road _ Add Miami Beach, FL 33139 ✓ Remove ☐ Add ☐ Remove □Add Remove ∏ Add Remove ___Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 29 Dated_ Signature of a member or authorized representative of a member Tony Hannan Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00