1100000001334

| (Reque | estor's Name) | | | |
|---|------------------------|--|--|--|
| (Addre | ss) | | | |
| (Addre | ss) | | | |
| (City/S | tate/Zip/Phone #) | | | |
| PICK-UP | WAIT MAIL | | | |
| (Busine | ess Entity Name) | | | |
| (Document Number) | | | | |
| Certified Copies | Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | | |
| L. SELLE FEB 2 6 2010 EXAMINE | | | | |

Office Use Only



900167246779

02/25/10--01033--019 **25.00

10 FEB 25 PH 1: 02
SECRETARY OF STATE
TAIL AHASSEF FLORING

COVER LETTER

| | ation Section 1 of Corporations | | |
|--|---|--|--|
| SUBJECT: | BC RES | OURCES LLC | |
| sebucer | | ed Liability Company | |
| The enclosed Art | icles of Amendment and fee(s) are sub | mitted for filing. | |
| Please return all o | correspondence concerning this matter t | to the following: | |
| | | Stuart A. Christmas | |
| | | Name of Person | |
| | Chr | ristmas & Spano P. A. | |
| | | Firm/Company | |
| | 2846 Ren | nington Green Circle Suite A | |
| | | Address | |
| | Ta | allahassee, Fl 32308 | |
| | | City/State and Zip Code | |
| • | Christma E mail address: (to | as@christmaslawfirm.com be used for future annual report notifical | · · · · |
| For further inform | nation concerning this matter, please ca | and the second s | |
| Tot futilier inform | manon concerning this matter, picase ca | | |
| | Stuart A. Christmas | | 36-1234 |
| | Name of Person | Area Code & Daytime T | elephone Number |
| Enclosed is a che | ck for the following amount: | | _ |
| ✓ \$25.00 Filing | Fee S30.00 Filing Fee & Certificate of Status | S\$5.00 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 Registration Section Division of Corporati Clifton Building 2661 Executive Centor Tallahassec, FL 3230 | ons t; or Circle |
| | • | | • |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| BC RESOUR | | | |
|--|--------------------|---------------------------|---|
| (<u>Name of the Limited Liability Company</u> (A Florida Limited Lia | as it now appears | on our records.) | |
| (A Florida Limited Lia | ionity Company) | | |
| The Articles of Organization for this Limited Liability Company v | vere filed on | 01-05-2010 | and assigned |
| Florida document numberL10000001234 | | | |
| | | | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited liabil | ity company here | : | |
| RBC RESOUR | CES LLC | | |
| The new name must be distinguishable and end with the words "Limite "L.L.C." | d Liability Compan | y," the designation "l | LLC" or the abbreviation |
| | | | |
| Enter new principal offices address, if applicable: | | | |
| (Principal office address MUST BE A STREET ADDRESS) | | | |
| | | | *************************************** |
| • | | | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | • | | |
| | | | |
| | | | · · · · · · · · · · · · · · · · · · · |
| B. If amending the registered agent and/or registered offi- | ce address on ou | r records, <u>enter 1</u> | he name of the nev |
| registered agent and/or the new registered office address here: | | | |
| | | | |
| Name of New Registered Agent: | | | - |
| | | | SEC TO |
| New Registered Office Address: | Forte | r Florida street add | |
| | Еще | r r ioriau sireei aaa | AAA N |
| | | , Florida | SEA STATE |
| | City | | The Code |
| New Registered Agent's Signature, if changing Registered Agent: | | | |
| | | | ~/ <u>~</u> [_] |

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 **Type of Action** Title Name 1 Address Add 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.) Dated Sloway 3; 2010 . Signature of a member or authorized representative of a member Stuart A. Christmas Typed or printed name of signce Page 2 of 2 Filing Fee: \$25.00