

LD 000029734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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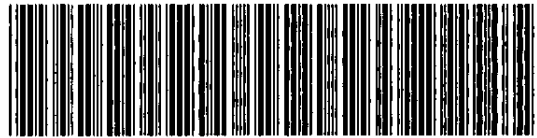
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APR 15 2010

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 APR 13 AM 10:16

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BAM Property Management, 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:

Jossie Acosta  
Name of Person

Firm/Company

14150 NW 3<sup>rd</sup> Ave  
Address

Miami FL 33168  
City/State and Zip Code

sobebabel@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jossie Acosta at 305, 970 2355  
Name of Person Area Code & Daytime Telephone Number

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 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



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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Jossie Acosta	14150 NW 3 <sup>rd</sup> Ave Miami FL 33168	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Jose I. Barreto	14150 NW 3 <sup>rd</sup> Ave Miami FL 33168	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Charles Mayer	same as above	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

All (3) DF US are equal owners  
and I, Jossie Acosta are also  
the Register agent to.

Dated

4/4/10

Signature of a member or authorized representative of a member

Typed or printed name of signee

Jossie Acosta