

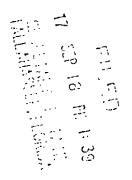
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(Business Entity Name)	
(Document Number)	<u> </u>
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FLORIDA DEPARTMENT OF STATE || Division of Corporations

August 23, 2017

MARIA PRATS HAMILTON ATTORNEY AT LAW 7600 RED RD, SUITE 229 SOUTH MIAMI, FL 33143

SUBJECT: BJV, LLC A FLORIDA LIMITED LIABILITY COMPÂNY Ref. Number: W17000069539

We have received your document for BJV, LLC A FLORIDA LIMITED LIABILITY COMPANY and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete application.,

Please return your document along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 817A00017398

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COVER LETTER

		istration Se sion of Cor						
		BJV, LLC.	a Florida limited liabilit	company				
SUBJEC	Т:		Name	of Limited I	iability Company			
The enclo	osed	Articles of	Amendment and fee(s)	re submitte	ed for filing.			
Please ret	turn	all correspo	ondence concerning this	 natter to th 	e following:			
			Maria Prats Hamilto	 n Attorney 	at Law			
					Name of Person		_	
			Maria Prats Hamilto	h Attorney	at Law			
				<u>. </u>	Firm/Company			
			7600 Red Road, Su] te 229 				
					Address			_
			South Miami, FL3.	143 				
			bjv.llc@gmail.com	Ci	ty/State and Zip C	ode		
					used for future an	nual report notifi	cation)	
For furthe	er in	formation c	oncerning this matter, p	èase call: 				
Maria Pra	ats l	damilton At	torney at Law		305 at (665-5610		
		Name o	l'Person		Area Code	Daytime	Telephone Number	
Enclosed	is a	check for th	ne following amount:					
\$25.0	00 Fi	ling Fee	□ \$30.00 Filing Fee Certificate of Sta		355.00 Filing F Certified Cop (additional copy i	y	S60.00 Filing Certificate of Certified Co (additional co)	of Status &
		Registr Divisio	ING ADDRESS: ation Section on of Corporations ox 6327		Regi: Divi:	EET/COURIE stration Section sion of Corpora on Building		0 5
		Tallaha	issee, FL 32314		2661	Executive Cen thassee, FL 323		- 1. 2g

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BJV, LLC, a Florida limited liability company

(Name of the Limited Liability Co	ompany as it now appears on our records.) ited Liability Company)			
	pany were filed on $4/12/2010$ and assigned			
Florida document number $\frac{L100000392}{444}$	and assigned			
Florida document number E10000039244				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	liability company here:			
The new name must be distinguishable and contain the words "Limited"	Liability Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:				
<u>(Principal office address MUST BE A STREET ADDRES:</u>	<u> </u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
Mulling materess MAT BEAT OUT OF THE DOWN				
R If amending the registered ugant and/or registere	d office address on our records, enter the name of the no			
registered agent and/or the new registered office address				
				
Name of New Registered Agent:				
Name of New Registered Agent.				
New Registered Office Address:				
	Enter Florida street address			
<u> </u>	, Florida			
	City Zip Code			
New Registered Agent's Signature, if changing Registered Ag	ent:			
provisions of all statutes relative to the proper and comp	agree to act in this capacity. I further agree to comply with the lete performance of my duties, and I am familiar with and as provided for in Chapter 605, F.S. Or, if this document is fice address, I hereby confirm that the limited liability			

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> Name **Address Type of Action** Vanessa Goenaga AMBR 8344 SW 8 Street, Miami, FL 3314 ■ Add _□ Remove ☐ Change □ Add □ Remove _□ Change □ Add □ Remove ☐ Change □ Add ☐ Remove _ Change :_□ Remove _ Change □ Add -□ Remove _□ Change

5 16 11 11 11 11		
D. It amending any other information, ente	r change(s) here: (Attach additional sheets, if n	ecessary.)
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	<u> </u>	
-		
E. Effective date, if other than the date of f	ling: (a)	ntional
(If an effective date is listed, the date must be specifi	and cannot be prior to date of filing or more than 90 days a	ptional) :fter filing.) Pursuant to 605.0207 (3)(
Note: If the date inserted in this block does redocument's effective date on the Department	not meet the applicable statutory filing requirements, of State's records.	this date will not be listed as the
•		
If the record specifies a delayed effective	ye date, but not an effective time, at 12:0	1 a.m. on the earlier of:
(b) The 90th day after the record is fil	ed.	
August 18	2017	
Dated		
Mg	_ /	
/ Signature	ecucies 9 NV of a member opauthorized representative of a member	
, ,		
Bernardo Goenaga		
	Typed or printed name of signee	
		5. J. O.
	Page 3 of 3	
	II	

Filing Fee: \$25.00