## L10000043064

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C. LEWIS

MAY 1 0 2010

EXAMINER

## **COVER LETTER**

Division of Corp						
SUBJECT: B. M. M. Management LL.C.  Name of Limited Liability Company						
<b>₽</b>	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:						
	Bryan M. Wells Name of Person					
	BMM Management LLC					
	• •					
	7522 Westmoreland Dr.					
	Address					
	Sarasota FL 34243 City/State and Zip Code bryannwells@gmail.com					
	City/State and Zip Code					
	E-mail address: (to be used for future annual report notification)					
For further information co	ncerning this matter, please call:					
Bryan	Wells at (941), 809-2188					
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  Certificate of Status  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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

	01	2010 HAY -7 PM 1 58		
B.M.M. Manage	ement L.L.C.			
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our r	ecords.) SECRETARY OF STATE TALLAHASSEE, FLORIDA		
(A Florida Limite				
The Articles of Organization for this Limited Liability Compa	any were filed on 4/22/1	O and assigned		
Florida document number L10000043064.				
This amendment is submitted to amend the following:				
·				
A. If amending name, enter the new name of the limited li	iability company here:			
	: 2 11 2122 C 24 1	signation (III C'22 and the althoughting		
The new name must be distinguishable and end with the words "L.L.C."	amited Liability Company," the de	signation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)	1			
(Frincipal Office address MOST BE A STREET ADDRESS)	<u></u>			
Enter new mailing address, if applicable:	7522 West	vocaland Nr.		
• • • •	Saccota F	Moreland Dr. FL 34243		
(Mailing address MAY BE A POST OFFICE BOX)	3011001001	<u> </u>		
B. If amending the registered agent and/or registered	office address on our recor	ds, enter the name of the new		
registered agent and/or the new registered office address b	<u>here</u> :			
Name of New Registered Agent:				
New Registered Office Address:				
,	Enter Florid	Enter Florida street address		
		Florida		
	City	Zip Code		
New Registered Agent's Signature, if changing Registered Age	ent:			

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:

	Manager   = Managing Member		
<u>Tītle</u>	<u>Name</u>	Address	Type of Action
MGRI	M Michael J. Johnson	P.O. Box 21187 Sarasota, FL 34276	Add Remove
MGR	M Mason L. Tush Jr.	7524 Westmoreland Dr Sarosota, FL 34243	Add Remove
			Add Remove
			Add Remove
			☐Add ☐Remove
			Add Remove
D. If an	nending any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	_
			_ _
Dated _	May 5th , 2010	<del></del> :	FILT 2010 MAY -7 SECRETAR
	Mason Tu	r authorized representative of a member	F STA
	•	Page 2 of 2	NO PORTON

Filing Fee: \$25.00