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(R	equestor's Name)				
(A	ddress)				
(A	ddress)				
(C	city/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Fing Office:					
	AUG -3 ?0	10			
EXAMINER					
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Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORIBA

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COVER LETTER

Division of C		•		
SUBJECT:	Baysio	de REO, LLC		
		ted Liability Company		
	of Amendment and fee(s) are sub	-		
Please return all corres	pondence concerning this matter	to the following:		
		James Goetz		
		Name of Person	•	
•		Bayside REO, LLC		
		Firm/Company		
	8888 Ke	systone Crossing Suite 1300		
		_Address		=
	<u> </u>	ndianapolis, IN 46240	AHASSEE, FI	ea por
		City/State and Zip Code	O T	ľ
	Jame E-mail address: (sg@bandwagonreo.com to be used for future annual report notificatio	n) To K	(
For further information	n concerning this matter, please o	eall:	TALLAHASSEE, FLORIGA	
	G. Cento		0-0678	
Name	e of Person	Area Code & Daytime Tele	ephone Number	
Enclosed is a check for	r 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		STREET/COURIER A Registration Section Division of Corporation		

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Bayside REO, LLC			
(Name of the Limite	d Liability Company as it now appe A Florida Limited Liability Company)	ars on our records.)	, 	
`	,			
The Articles of Organization for this Limited	Liability Company were filed on	July 6th 2010	and assigned	
Florida document numberL1000007	71721		•	
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liability company he	e <u>re</u> :		
	N/A			
The new name must be distinguishable and end w	rith the words "Limited Liability Comp	oany," the designation "L	LC" or the abbreviation	
"L.L.C."			TAGE TO THE	
Enter new principal offices address, if appl	icable:			
(Principal office address MUST BE A STRE	ET ADDRESS)		To To	
			SER SO	
			m m	
Enter new mailing address, if applicable:			FIGURE 2	
(Mailing address MAY BE A POST OFFICE	E ROX)		25	
[PARKING WHEFESS 19211 DE 71 1 US 1 UT 1 UE			7 wy	
B. If amending the registered agent and	l/or registered office address on	our records, enter t	he name of the new	
registered agent and/or the new registered				
Name of New Registered Agent:	N/A			
New Registered Office Address:				
	Enter Florida street address			
		, Florida		
	City		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 Type of Action **Title** Address <u>Name</u> MGR James Goetz 3300 W. Rolling Hill Circle Apt 707 Remove Davie, FL 33328 ☐ Add Remove ☐ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **ツーマフー10** Dated_ Signature of a member or authorized epresentative of a member James C. Goetz, on behalf of Bandwagon Real Estate, LLC, Member

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00