## L100000 74146

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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## **COVER LETTER**

|            | Registration Se<br>Division of Cor |  |   |  |  |  |  |  |
|------------|------------------------------------|--|---|--|--|--|--|--|
| eun ice    |                                    | LOPMENT GROUP, LLC                           |   |  |  |  |  |  |
| SUBJEC     | 1:                                 | Name of Lim                                  | ited Liability Company  |  |  |  |  |  |
| The enclo  | osed Articles of                   | Amendment and fec(s) are sub                 | mitted for filing.  |  |  |  |  |  |
| Please ret | um all correspo                    | endence concerning this matter               | to the following:   |  |  |  |  |  |
|            |                                    | Carrie Christino                             |   |  |  |  |  |  |
|            |                                    |  | Name of Person  |  |  |  |  |  |
|            |                                    | Soho Capital, LLC                            |   |  |  |  |  |  |
|            |                                    |  | Firm/Company  | <del></del>  |  |  |  |  |
|            |                                    | 701 S Howard Ave Ste 106                     | 6-322   |  |  |  |  |  |
|            |                                    | Address                                      |   |  |  |  |  |  |
|            |                                    | Tampa, FL 33606                              |   |  |  |  |  |  |
|            |                                    | City/State and Zip Code                      |   |  |  |  |  |  |
|            |                                    | Carrie@soho-capital.com                      |   |  |  |  |  |  |
|            |                                    | E-mail address: (                            | to be used for future annual report notif                           | ication)   |  |  |  |  |
| For furthe | er information c                   | oncerning this matter, please ca             | all:  |  |  |  |  |  |
| Carrie Cl  |                                    |  | 813 557-4901  |  |  |  |  |  |
|            | Name o                             | 「Person                                      | Area Code Daytime   | : Telephone Number   |  |  |  |  |
| Enclosed   | is a check for th                  | ne following amount:                         |   |  |  |  |  |  |
| \$25.0     | 0 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:

TO:

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 OF

| BCI DEVELOPMENT GROUP,  | LLC                 |  |                            |                   |
|---|---------------------|--|----------------------------|-------------------|
| (Name of the Lin  | (A Florida Limited  | any as it now appears on<br>Liability Company) | our records.)              |                   |
| The Articles of Organization for this Limited   | Liability Company   | y were filed on 07/14/                         | 2010                       | and assigned      |
| Florida document number L10000074146  | <u></u> .           |  |                            |                   |
| This amendment is submitted to amend the following                                    | llowing:            |  |                            |                   |
| A. If amending name, enter the new name   | of the limited liab | bility company here:                           |                            |                   |
| The new name must be distinguishable and contain the                                  | words "Limited Liab | ility Company," the design                     | nation "LLC" or the abbi   | eviation "L.L.C." |
| Enter new principal offices address, if appli   | icable:             |  |                            | <sup>1</sup>      |
| (Principal office address MUST BE A STRE  | ET ADDRESS)         |  |                            |                   |
|   |                     |  |                            |                   |
|   |                     |  |                            | 13 , 1            |
| Enter new mailing address, if applicable:   |                     |  |                            |                   |
| (Mailing address MAY BE A POST OFFICE   | BOX)                |  |                            |                   |
|   |                     |  |                            | <u></u>           |
| B. If amending the registered agent and registered agent and/or the new registered of |                     |  | r records, <u>enter ti</u> | e name of the new |
| Name of New Registered Agent:   | David Koche         |  |                            | <del></del>       |
| New Registered Office Address:  | 601 Bayshore I      | Blvd Ste 700                                   |                            |                   |
|   |                     | Enter Florida si                               | reet address               |                   |
|   | Tampa               |  | , 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 605, 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 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> | <u>Name</u>    | Address                                    | <b>Type of Action</b> |
|--------------|----------------|--|-----------------------|
| AGENT        | Charles Harper | 100 N TAMPA ST Ste 2700<br>Tampa, FL 33602 | ☐ Add                 |
|              |                |  | ■ Remove              |
|              |                |  | □ Change              |
| AREP         | Charles Harper | 100 N Tampa ST Ste 2700<br>Tampa, FL 33602 | □ Add                 |
|              |                |  | Remove                |
|              |                |  | Change                |
| <del></del>  |                |  | Add                   |
|              |                | <del></del>                                | □ Remove              |
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|                 |                            |                         |                            |   |   |  |                                |                                    |                                      |
| ctive o         | late, if othe              | r than the              | date of fili               | ng:   |   |  | (                              | optional)                          |                                      |
| <u>e:</u> If th | ne date insert             | ed in this bl           | ock does not               | t meet the a  | ipplicable sta  | of filing or mo<br>stutory filing      | e than 90 days<br>requirements | after filing.) I<br>s, this date w | oursuant to 605.02 ill not be listed |
| ument`.         | s effective da             | ate on the D            | epartment of               | f State's rec   | ords.   |  |                                |                                    |                                      |
|                 |                            |                         | 1 - <i>6</i> 6             | d-a. 1  |   |  |                                |                                    |                                      |
| re 90           | r specifies<br>th day afte | a delayed<br>er the rec | i eπective<br>ord is filed | date, bu<br>d.  | it not an e   | effective tir                          | ne, at 12:                     | 01 a.m. oı                         | n the earlier                        |
|                 |                            |                         |                            |   |   |  |                                |                                    |                                      |
| ed              | 27/2019                    |                         |                            | _,  | ·   |  |                                |                                    |                                      |
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Filing Fee: \$25.00