# LICOLO84178

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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JEORETARY OF STATE
LITE ANALYSEE, FLORIDA

MAR 1 5 2016

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February 23, 2016

LI PAUL SIRMANS 304 MAGNOLIA AVE PANAMA CITY, FL 32402

SUBJECT: BCB CONSTRUCTION, LLC

Ref. Number: L10000084178

We have received your document for BCB CONSTRUCTION, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L10000084197.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 516A00003732





### HARRISON SALE McCLOY

L. PAUL SIRMANS psirmans@HSMcLaw.com

2050 W. County Hwy 30A Suite M1-109 Santa Rosa Beach, FL 32459 T 850.650.0077

March 11, 2016

Stacey M. Mason Regulatory Specialist II Florida Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: L10000084178 & L10000084197

Dear Ms. Mason,

Enclosed you will find the two filings which were separately rejected. At the very end of last year, these two names were swapped by the common owners. It seems the only difference was that I called ahead and sent them both to one specialist. The reason for the filing was to correct a previous administrative error.

Now, we would simply like to switch them back. The consent is still mutual between the two companies, and I represent both of them in this capacity. We had previously sent two checks each in the amount of \$25.00 to cover the costs of filing.

Please call with any questions or concerns.

LPS/lah

#### COVER LETTER'S

	Registration Sec Division of Corp		<u>.</u>	
SUBJEC	ст: <u>Е</u>	SCB COWST Name of Lin	RUCTION, LL	<u>C.</u>
The encl	osed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspon	dence concerning this matter	to the following:	•
		L. PAC	Name of Person	·
		HARRISO	N SACE McCco	7
		304 MA	Address	
		PANAMA	CITY PL 3 City/State and Zip Code  Manse hsmclar (to be used for future annual report notifications)	2402
		E-mail address:	manse hsmelar (to be used for future annual report notification)	w, com
For furth	er information co	neerning this matter, please c	eall:	
<u> 4</u>	SA HER	RING- Person	at (80) 769 Area Code Daytime	- 3434 Telephone Number
Enclosed	l is a check for the	following amount:		
<b>≱</b> \$25.0	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

## ARTICLES OF AMENDMENT ' TO ARTICLES OF ORGANIZATION OF

BCB CONSTRUC	TION,	LLC
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears of ability Company)	on our records.)
The Articles of Organization for this Limited Liability Company	vere filed on	3/11/2016 and assigned
Florida document number <u>L10000084178</u> .		,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here	;
BCB MANAGEMENT  The new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the new name m	LLC	
The new name must be distinguishable and contain the words "Limited Liabili	y Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<del></del>	a commence of the commence of
	•	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		our records, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	street address
		, Florida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p		

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

GR = N MBR = A	Aanager Authorized Member		
<u>tle</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
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	iding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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rece	ve date, if other than the date of filing:
ed _	2/12/2016, All
ed_	Signature of a member of authorized representative of a member
ed _	Signature of a member of authorized epresentative of a member  L, PAUL SIRMANS  Typed or printed name of signee
ed _	Signature of a member of authorized sepresentative of a member  L, PAUL SIRMANLS

Filing Fee: \$25.00