7/5/23, 3:53 PM

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000236356 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VENERABLE CORPORATE AND TRUST SERVICES, LLC

Account Number : I20210000107 Phone : (813)284-4727

Fax Number : (813)436-8460

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

notices@venerable.law Email Address:\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BA HOLDINGS & PROPERTIES LLC

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 04      |
| Estimated Charge      | \$25.00 |

S. ROBERTS

Electronic Filing Menu Corporate Filing Menu

Help

JUL - 6 2023

Registration Section

TO:

## **COVER LETTER**

| Division of Co                             | rporations                                |  |   |
|--|---|--|---|
| BA HOLD                                    | INGS & PROPERTIES LLC                     | •  |   |
| SUBJECT:                                   | Name of Lin                               | nited Liability Company  | , -, -, -   |
| The enclosed Articles of                   | Amendment and fee(s) are sub              | omitted for filling.   |   |
| Please return all correspondent            | ondence concerning this matter            | to the following:  |   |
|  | JASON SAMPSON                             |  |   |
|  | <del></del>                               | Name of Person   |   |
|  | Venerable Corporate and                   | frust Services, LLC  |   |
|  |   | Firm/Company   |   |
|  | 301 West Platt Street, No.                | 657  |   |
|  |   | Address  |   |
|  | Tampa FL 33606                            |  |   |
|  |   | City/State and Zip Code  | <del></del>   |
|  | jsampson@venerable.law                    |  |   |
|  |   | to be used for future annual report not                          | ification)  |
| For further information of                 | concerning this matter, please of         | all:   |   |
| Jason Sampson                              |   | 813 284-4727   |   |
| Name (                                     | of Person                                 | at ()  | ne Telephone Number   |
| Enclosed is a check for t                  | he following amount:                      |  |   |
| ■ \$25.00 Filing Fee                       | S30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <ul> <li>\$60.00 Filing Fec.</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul> |
| MailingAddres Registration S Division of C | Section                                   | <u>StreetAddress:</u><br>Registration Se<br>Division of Cor      |   |
| P.O. Box 6327<br>Tallahassee, FL 32314     |   | The Centre of T  | •   |
| rananassee,                                | I I. 34314                                | Tallahassee, FL  |   |

If Changing Registered Agent. Signature of New Registered Agent

To:

From: Venerable Law Firm H23000236356 3

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| BA HOLDINGS & PROPERTIES LI  | LC.  |   |  |                                   |
|--|--|---|--|-----------------------------------|
| (Name of the Limited   | Liability Compa<br>V Florida Limited               | iny as it now apocars on ou<br>Liability Company) | r records.)                                | <del></del>                       |
| The Articles of Organization for this Limited Lial Florida document number L10000091248  | bility Company                                     |   |  | _ and assigned                    |
| This amendment is submitted to amend the follow  | ving:  |   |  |                                   |
| A. If amending name, enter the new name of t   | he limited liah                                    | ility company here:                               |  |                                   |
| The new name must be distinguishable and contain the wor   | ds "Limited Liabi                                  | lity Company," the designation                    | on "LLC" or the abbrev                     | iation=1lC."                      |
| Enter new principal offices address, if applicable:  |  | 301 West Platt Street, S                          | lo, 657                                    | ٠ <del>٠</del> ٠                  |
| (Principal office address MUST BE A STREET   | ADDRESS)   | Татря FL 33606                                    |  |                                   |
|  |  |   |  | · · ·                             |
| Enter new mailing address, if applicable:  |  | 301 West Platt Street, N                          | ło, 657                                    | <br>5                             |
| (Mailing address MAY BE A POST OFFICE BO   | <i>0X</i> )  | Tampa FL 33606                                    |  | <del></del>                       |
| B. If amending the registered agent and/or reg   | <u>here</u> :                                      | address on our records. CORPORATE AND TRU         |  |                                   |
| Name of New Registered Agent:  |  |   |  |                                   |
| New Registered Office Address:   | 301 West Platt                                     | Street, No. 65 /<br>Enter Florida stree           | A cultrass                                 | <del></del>                       |
|  | Tampa  | Time Tax matter                                   |  |                                   |
|  |  | Сіцу  | Florida <u>33606</u>                       | Zip Code                          |
| New Registered Agent's Signature, if changing Re-  | gistered Agent:                                    |   |  |                                   |
| I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registe being filed to merely reflect a change in the recompany has been notified in writing of this change in the change in this change in the c | and complete<br>ered agent as p<br>gistered office | performance of my du<br>provided for in Chapter   | ties, and I am fam<br>r 605, F.S. Or, if t | iliar with and<br>his document is |

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

To:

| <u>Title</u> | Name               | Address                     | Type of Action |
|--------------|--------------------|-----------------------------|----------------|
| MGR          | LEDGER, JEREMY A   | 3243 Flamingo Blvd          | □Add           |
|              |                    | Hernando Beach, FL 34607    | ■Remove        |
|              |                    |                             | □Change        |
| MGRM         | Ledger, Nicole O   | 3243 Flamingo Blvd.         |                |
|              |                    | Hernando Beach, FL 34607    | ≣Remove        |
|              |                    |                             | ☐ Change       |
| Mbr          | Coco's Melons, LLC | 30 N. Gould Street, Suite R | <b>=</b> Add   |
|              | Sheridan, WY 82801 | □ Remove                    |                |
|              |                    |                             |                |
|              |                    |                             |                |
|              |                    | <u> </u>                    | □Remove        |
|              |                    | □Change                     |                |
| <del></del>  | <del></del>        |                             |                |
|              |                    | □Remove                     |                |
|              |                    | ☐ Change                    |                |
|              |                    |                             | □Add           |
|              |                    |                             | Remove         |
|              |                    |                             | □ Change       |

| <del></del>   |  |                                     |
|---|--|-------------------------------------|
|   |  |                                     |
|   |  |                                     |
|   |  |                                     |
|   |  |                                     |
|   |  |                                     |
|   |  |                                     |
|   |  | <del></del>                         |
|   |  |                                     |
|   |  |                                     |
|   |  | <u> </u>                            |
|   |  |                                     |
|   |  |                                     |
| til an effective date is listed, the date m           | e date of filing:  |                                     |
| he record specifies a delayed effect<br>ord is filed. | re date, but not an effective time, at 12:01 a.m. on the ear | tier of: (b) The 90th day after the |
| Dated July 5  | 2023   |                                     |
| fason Sax   | Signature of a member or authorized representative of a memb | ber                                 |
|   | , ,  |                                     |
| JASON SAMPSON   |  |                                     |