L10000103714

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

Office Use Only



300199791673

FILING CANCELLED RETURNED CHECK

04/01/11--01024--011 **25.00

2011 APR -1 AM DO 17
SECRETARY OF STATE
TAIL AMASSEE ELOSIS

T. CLINE

APR - 4 2011

EXAMINER

COVER LETTER

TO:	Registration S Division of Co					
· · · ·			eet Holdings, LLC			
			ited Liability Company			
The en	closed Articles o	f Amendment and fee(s) are su	bmitted for filing.			
Please	return all corresp	ondence concerning this matte	er to the following:			
			Ariana Sharrock			
			Name of Person			
Broadstreet Ho			oadstreet Holdings, LLC			
Firm/Company		Firm/Company				
		PO Box 2424				
			Address			
			Orlando, FL. 32802			
			City/State and Zip Code			
			aa_bhllc@live.com		20 SE TAL	
For fur	ther information	E-mail address: concerning this matter, please	(to be used for future annual report no call:	otification)	2011 APR - I SECRETARY ALLAHASSE	
		Elkin Rios	at (407)	491-6422	CT	
	Name	of Person	Area Code & Day	time Telephone Number		
Enclose	ed is a check for (the following amount:			17 IDA	
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	sed) Certified	te of Status &)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	oorations Center Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILING CANCELLED RETURNED CHECK

Broadstre	et Holdings, LLC	<u> </u>				
(Name of the Limited Liability C (A Florida Lin	ompany as it now appe	ars on our records.)				
(A 1 lottes this	inted Elabinty Company)					
The Articles of Organization for this Limited Liability Con	npany were filed on	October 4, 2010	and assigned			
Florida document numberL10000103714						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited	d liability company be	ero.				
the manual figures and the figure of the minute	<u>ч паршет сопрану по</u>	40.				
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Comp	pany," the designation "L	LC" or the abbreviatio	n		
Enter new principal offices address, if applicable:	· 					
(Principal office address MUST BE A STREET ADDRES	SS)					
			7			
			AR AS			
Enter new mailing address, if applicable:			HA R	į		
(Mailing address MAY BE A POST OFFICE BOX)			SS !	er Tale Palcie		
22.1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.			ino _ hat			
			~~~~	ŀ		
			1 - (A	ĵ		
B. If amending the registered agent and/or registered	ed office address on	our records, enter th	e name of the nev	¥		
registered agent and/or the new registered office address	s here:	•	7			
Name of New Registered Agent:						
Name of New Registered Agent.						
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 Address <u>Title</u> **Name** MGRM Ariana Sharrock ✓ Add 857 Ketch Ct Remove Rodeo, CA 94572 ☐ Add Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 04 Dated Signature of a member or authorized representative of a member Elkin Rios Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00