

L10000 112 772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

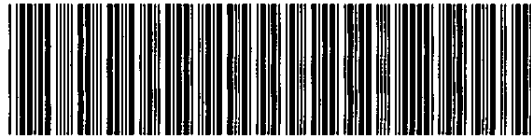
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

NOV 16 2012

S. TONER

Office Use Only



300241688483

11/15/12--01023--015 \*\*25.00

FILED  
12 NOV 15 AM 11:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: BW BREVARD HOLDINGS, LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**WILLIAM G. WALDEN**

Name of Person

**BW BREVARD HOLDINGS, LLC**

Firm/Company

**3615 Sparrow Hawk Trail**

Address

**Mims, Florida 32754**

City/State and Zip Code

**billwalden1968@gmail.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Bill Walden**

Name of Person

at ( **321** )

**403-8105**

Area Code & Daytime Telephone Number

Enclosed is a check for 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  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

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



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

| <u>Title</u> | <u>Name</u>       | <u>Address</u>                          | <u>Type of Action</u>                                                      |
|--------------|-------------------|-----------------------------------------|----------------------------------------------------------------------------|
| MGR          | Scott Hackenberry | 3725 Carter Road<br>Mims, Florida 32754 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                   |                                         | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                   |                                         | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                   |                                         | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                   |                                         | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                   |                                         | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

---



---



---



---



---

Dated October 31, 2012

William G. Walden  
Signature of a member or authorized representative of a member

William G. Walden  
Typed or printed name of signee