	3124219
(Requestor's Name) (Address) (Address)	500273347595
(City/State/Zip/Phone #)	08/13/1501002006 **25.00
PICK-UP WAIT MAIL     (Business Entity Name)     (Document Number) Certified Copies Certificates of Status	15 AUG 12 AM 9: 32 ALLSHASSEE, FLORIDA
Special Instructions to Filing Officer:	RECEIVED ANUSTRY OF OURPORNMENT
Office Use Only	
	AUG 1 3 2015 Y SULKER

C	ORPORATE ACCÉSS,	When you	1 need ACCESS to the world
	INC.		6th Avenue. Tallahassee, Florida 32303 ) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666
		W	ALK IN
		PICK UP:	8-12-15
	CERTIFIE	D COPY	
$\mathbf{k}$	рнотосо	OPY	
	CUS		
¢	FILING		Amend
l.	CORPORATE N	Ui HY POCHUES ME AND DOCUMENT #)	Amend 1,LLC
2. 3.	(CORPORATE NA	ME AND DOCUMENT #)	
	(CORPORATE NA	ME AND DOCUMENT #)	
1.	(CORPORATE NA	ME AND DOCUMENT #)	
5.	(CORPORATE NA	ME AND DOCUMENT #)	
5.	(CORPORATE NA	ME AND DOCUMENT #)	
SPECIA	L INSTRUCTIO	NS:	

# **COVER LETTER**

TO:	<b>Registration Section</b>		
	Division of Corporations		

SUBJECT:

# **BRC EQUITY PARTNERS I, 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:

Kevin A. Denti, Esquire

Name of Person

Kevin A. Denti, P.A.

Firm/Company

2180 Immokalee Road - Suite #316

Address

Naples, Florida 34110

City/State and Zip Code

kdenti@dentilaw.com

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

For further information concerning this matter, please call:

Kevin A. Denti, Esquire	239	260-8111
Name of Person	at () Area Code	Daytime Telephone Number
Name of Person	Alea Coue	Dayinte receptone control

#### 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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### **BRC EQUITY PARTNERS I, LLC**

#### (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>12/02/2010</u>	_ and assigned
Florida document number L10000124219	

This amendment is submitted to amend the following:

### A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

#### Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)	
---	--

		1. J. J.
Enter new mailing address, if applicable:		F-2 2 17
Mailing address MAY BE A POST OFFICE BOX	2	To and the second secon
		ds, enter the name of the new
B. If amending the registered agent and/or registered agent and/or the new registered office a section of the new registered office and the new registered agent and the new registered office and the new registered agent a		
Name of New Registered Agent:		<b></b>
New Registered Office Address:		
	Enter Florida street addr	£71
	,	lorida
	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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

.

. ,

# MGR = Manager AMBR = Authorized Member

.

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Blue River Capital, LLC	808 Miramar Street	□ Add
		Cape Coral, Florida 33904	Remove
MGR	Robert C. Wetenhall, Jr.	643 Cape Coral Parkway East - S	uite C
		Cape Coral, Florida 33904	C Remove
			Aden
			AUG TE TI
			C Remove
			Add
			E Remove
			Add
			□ Remove

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

.

E. Effective date, if other than the date of filing: \_\_\_\_\_\_(optional (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) (optional) 12 Dated 0 Signature of a member or authorized representative of a member Kevin A. Denti, Esquire Typed or printed name of signee

5 AUG 12 AM 9: 33 εĘ []]

Page 3 of 3

Filing Fee: \$25.00