L11000008911

(Requestor's Name)					
(ragasser a rame)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
, , , , , , , , , , , , , , , , , , , ,					
PICK-UP WAIT MAIL					
• (Business Entity Name)					
i .					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
A. LUNT					
A. LUNI					
MAR 29 2010					
EXAMINER					

Office Use Only



800198361498

03/28/11--01059--004



TALLAND SECT. FLETTS

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	BK 801 NE	43A LLC	
		ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
	DAVID	N. MCNULTY Name of Person	
		Name of Person	
	BAKED	KEYS, LLC.	
	9160	THE LANE	
		Address	
•	NAPLE	S FL 3410° City/State and Zip Code	9
	beanna	City/State and Zip Code	
	E-mail address: (lunkin @ yahoo. Con to be used for future annual report notific	eation)
For further information of	concerning this matter, please c	call:	
Maria t	fernandez	at (<u>Z39</u>) <u>275 · 21</u> Area Code & Daytime	R Telephone Number
. anno C	77 1013011	And Code & Dayame	Telephone (Valitoe)
Enclosed is a check for t	he 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 enclose)

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**

BK 801 A	VE 43A	, LLC			
(<u>Name of the Limited L</u> (A F	liability Company Torida Limited Lia	as it now ap ibility Compa	pears on our re ny)	ecords.)	
The Articles of Organization for this Limited Liab	bility Company w	vere filed on	January	21,201	and ass
Florida document numberLIIOOOO84	<u> </u>		ŕ		
This amendment is submitted to amend the follow	ving:				
A. If amending name, <u>enter the new name of t</u>	he limited liabili	ity company	here:		
The new name must be distinguishable and end with "L.L.C."	the words "Limite	d Liability Co	mpany," the de	signation "Ll	LC" or the a
Enter new principal offices address, if applicat	ole:				
(Principal office address MUST BE A STREET	ADDRESS)			ائر 	
Enter new mailing address, if applicable:				(1) (2) (3) (4) (4)	MAR 28 1
(Mailing address MAY BE A POST OFFICE BO	<u>ox</u>)			* Mar. 11 ***	-
				, <u>(</u>	<u>်</u> မ
B. If amending the registered agent and/or registered agent and/or the new registered office		ce address o	on our record	ls, <u>enter th</u>	e name o
Name of New Registered Agent:	David	N. M	chulty		
New Registered Office Address:	9160	The La	I NE Enter Florida	street addr	ess
	Mania	c			
	- Maple	City	, I	riorida	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:				

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comp the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this docu 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 eac or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member <u>Title</u> <u>Name</u> **Address** Type (David N. McNulty MGR ☐ Adc ☐ Adc ∏Adc Ren D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) 23 March Dated ___

Page 2 of 2

David N. McNulty
Typed or printed name of signee

Signature of a member or authorized representative of a member

Filing Fee: \$25.00