

L11000051195

(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:

Office Use Only



800209355348

06/27/11--01020--015 **125.00

FILED
11 JUL 11 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan JUN 28 2011

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BWT PARTNERS, 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:

STUART GREEN
Name of Person
BWT PARTNERS, LLC
Firm/Company
1228 WEST AVE APT 515
Address
MIAMI BEACH FL 33139
City/State and Zip Code
sgreen@bwt-partners.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STUART GREEN at (**786**) **797-7002**
Name of Person 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)

Note: I previously filed the wrong form (see

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

*attached letter)
with a check
for \$125. Please
refund Stuart Green
for \$100 = Thank you*



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 28, 2011

STUART T. GREEN
1128 WEST AVENUE #515
MIAMI BEACH, FL 33139

SUBJECT: BWT PARTNERS, LLC
Ref. Number: W11000034608

We have received your document for BWT PARTNERS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name has already been filed.

To receive a refund, please submit a written request to the attention of the undersigned. Be sure to include the name of the person or entity the check should be made payable to and the address to which it should be mailed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 911A00015532

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
11 JUL 11 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BWT PARTNERS, 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 05/02/2011 and assigned Florida document number L11000051195.

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 "L.L.C."

Enter new principal offices address, if applicable: 200 SE 1ST STREET
4TH FLOOR
MIAMI, FL 33131
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: 200 SE 1ST STREET
4TH FLOOR
MIAMI, FL 33131
(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

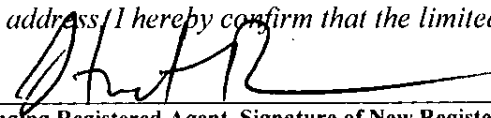
Name of New Registered Agent: GREEN, STUART T

New Registered Office Address: 200 SE 1ST STREET 4TH FLOOR
Enter Florida street address

MIAMI, Florida 33131
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	GREEN, STUART T	1228 WEST AVE #515 MIAMI BEACH, FL 33139	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	GREEN, STUART T	200 SE 1ST STREET 4TH FLOOR MIAMI, FL 33131	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	VASQUEZ, JAVIER O	200 SE 1ST STREET 4TH FLOOR MIAMI, FL 33131	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated JULY 6, 2011

FILED
 11 JUL 11 AM 9:49
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



 Signature of a member or authorized representative of a member

STUART T GREEN

 Typed or printed name of signee