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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 26, 2011

JOHNNY BEARZI 1010 KERWOOD CIRCLE OVIEDO, FL 32765

SUBJECT: B & B FINANCIAL MARKETING, "LLC"

Ref. Number: L11000052734

We have received your document for B & B FINANCIAL MARKETING, "LLC". However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$30.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 611A0001764

COVER LETTER

SUBJECT:		cial Marketing, "LLC ited Liability Company	· · · · · · · · · · · · · · · · · · ·			
The enclosed Articles o	of Amendment and fee(s) are sui	bmitted for filing.				
Please return all corresp	condence concerning this matter	r to the following:				
		Johnny B. Bearzi				
		Name of Ferson				
	B & B Financial Marketing, "LLC"					
		Firm/Company				
		1010 Kerwood Circle				
		Address				
		Oviedo, FL 32765				
		City/State and Zip Code		As	<u> </u>	
		bearzij@yahoo.com			-	s Canada de Pro-
	E-mail address: (to be used for future annual report	rt notification)	主流	9	प्रं ; कारकवर
For further information	concerning this matter, please of	eall:		SSEE SSEE	2011 AUG -3 PM 3: 46	r.
Joh	nnny B. Bearzi	at (_407_)	619-7239 Daytime Telephone Number	円の	1	ها الاحتاج سين رياة
Name	of Person	Area Code & I	Daytime Telephone Number	DRIDA DRIDA	3: 1:	
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	Certificate (additional	e of Statu Copy		d)

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

B & B Fina (Name of the Limited Liability (A Florida	ncial Marketing, "LL y Company as it now appear Limited Liability Company)	C" rs on our records.)		
The Articles of Organization for this Limited Liability C	Company were filed on	May 04, 2011	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the lim</u>	ited liability company her	<u>e</u> :		
The new name must be distinguishable and end with the wor'L.L.C."	rds "Limited Liability Compa	ny," the designation "LL	.C" or the abbreviation	
Enter new principal offices address, if applicable:			<u> </u>	
Principal office address MUST BE A STREET ADDI	RESS)			
Enter new mailing address, if applicable:			ARY OF	
(Mailing address MAY BE A POST OFFICE BOX)			3 3 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, <u>enter th</u>	e name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	City	, Florida	Zip Code	
	-·- <i>J</i>			

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 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> **Address** Type of Action **MGRM** Johnny B. Bearzi 1010 Kerwood Circle Oviedo, FL 32765 ✓ Add
☐ Remove Remove ☐ Add Remove Add 🗌 Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 21 2011 Dated ___ Signature of a member or authorized representative of a member Johnny B. Bearzi

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00