

Division of Corporations

http://www.sos.state.fl.us/corp

**L11000064090**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
BCB MANAGEMENT SERVICES, LLC.

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

C. LEWIS

JUL - 8 2011

EXAMINER

**SECOND REQUEST**

H 1 1 0 0 0 1 7 5 2 2 4  
**ARTICLES OF AMENDMENT  
 TO  
 ARTICLES OF ORGANIZATION  
 OF**

• FILED

2011 JUL -6 AM 7:44

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**BCB MANAGEMENT SERVICES, 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 7/5/2011 and assigned  
 Florida document number L11000064090

This amendment is submitted to amend the following:

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

**BLM REALTY & MANAGEMENT SERVICES, LLC**

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:

2484 SW 115 AVE SUITE 1 MIAMI, FL 33165

(Principal office address MUST BE A STREET ADDRESS)

2484 SW 115 AVE SUITE 1 MIAMI, FL 33165

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O.BOX 650309, MIAMI, FL 33265 US

**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:

ROLANDO MARTIN LIC. R.E. BROKER

New Registered Office Address:

2484 SW 115 AVE SUITE 1

*Enter Florida street address*

MIAMI

Florida

33165

*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

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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

Title	Name	Address	Type of Action
MGRM	Lida M. Lira	4315 SW 98 CT MIAMI, FL 33165	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Mariela Martin-Fernandez	P.O. Box 650309 Miami, FL 33265	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Rolando Martin	763 SW 103 Pl Miami, FL 33174	<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.)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2011 JUL -16 AM 7:44  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

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Dated \_\_\_\_\_

 

Signature of a member or authorized representative of a member

Mariela Martin-Fernandez/Lira M. Lira/Rolando Martin

Typed or printed name of signee

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