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(Re	equestor's Name)					
(Ac	ldress)					
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		,				
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Bu	isiness Entity Nar	ne)				
(Do	ocument Number)					
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T. CLINE

DEL 28 2011

EXAMINER

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: 275 BC Property LLC				
	Name of Lim	ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.		
Please return all corresp	ondence concerning this matter	r to the following:		
·				
Group Dots, LLC				
Firm/Company				
	9180 V	Vest Bay Harbor Drive	# 2C	
		Address		
	E	Bay Harbor, FL 33154		
City/State and Zip Code				E 28
		aro.krupkin@gmail.com		
	E-mail address: (to be used for future annual repo	ort notification)	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
For further information	concerning this matter, please of	call:		SAY C
Al	varo Krupkin	at (_786_)	523-1348	2011 DEC 27 PM 1: 41 SESSENARY OF STATE
Name	of Person	Area Code &	Daytime Telephone Number	RIE +
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 en		of Status &

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

(Name of the Limite	275 BC Prod Liability Compa	operty LLC iny as it now appears or Liability Company)	our records.)				
The Articles of Organization for this Limited I Florida document number L1100012		were filed on Nov	ember 7 <u>,</u> 201	1 and a	ssigne	e d	
This amendment is submitted to amend the fol	lowing:						
A. If amending name, enter the new name of	of the limited liab	oility company here:					
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Company,"	the designation "	LLC" or th	e abbre	 viation	
Enter new principal offices address, if applicable:		9180 West Bay I	Harbor Drive #	‡ 2C			
(Principal office address MUST BE A STREET ADDRESS)		Bay Harbor, FL 3	33154	1200	23		
Enter new mailing address, if applicable:		9180 West Bay H	larbor Drive #	EAHASIG #26	I DEC 27	magn a	
(Mailing address MAY BE A POST OFFICE	Bay Harbor, FL 3	33154	<u> </u>	<u> </u>	1 1		
B. If amending the registered agent and registered agent and/or the new registered of			records, enter	the name	∵ — of th	e new	
Name of New Registered Agent:	Alvaro Kruj	okin					
New Registered Office Address:	9180 West Bay Harbor Drive # 2C						
	Enter Florida street address						
	Ba	y Harbor, FL	, Florida	331 Zip Co			
		City		Zip Co	ue		

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 emending 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 **Type of Action** Title **Address** Name **MGRM** Bluecow, LLC 20815 NE 16th Ave, # B17 ☐ Add
☑ Remove Miami, FL 33179 MGRM Group Dots, LLC 9180 West Bay Harbor Drive, # 2C ✓ Add Bay Harbor, FL 33154 Remove ☐ Add Remove ∏Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 22 2011 Dated ___ Signature of a member or authorized representative of a member ALVARO KRU Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00