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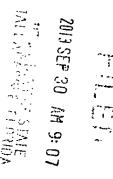
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J. SAULSBERRY EXAMINER

OCT 4 2013

COVER LETTER

TO: Registration Section
Division of Corporations

B&B ENT!

B&B ENTERPRISES KEY WEST 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:

	WILLIAM LA	ROSE	
		Name of Person	
		Firm/Company	20
	1033 SAND	YS WAY	2013 SEP
		Address	
	, p		
		City/State and Zip Code	AH 9: 07
	E-mail address: (I	o be used for future annual report notificat	9: 07
For further information c	oncerning this matter, please c	all;	
		at ()	
Name o	f Person	Area Code & Daytime To	elephone Number
Enclosed is a check for the	ne 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)

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

B&B ENTRPRISES KEY WEST LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited	Liability Company)	<u>şcorus.</u> ;
The Articles of Organization for this Limited Liability Compared Florida document number <u>L11000096367</u>	ny were filed on <u>08/22/2011</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and end with the words "Li "L.L.C."	mited Liability Company," the de	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		2018
		SE SE
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
		77/0
		9: 0
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	a street address
		Florida
	City	FloridaZip Code
New Registered Agent's Signature, if changing Registered Age	<u>nt:</u>	
I hereby accept the appointment as registered agent and a	gree to act in this capacity. I	further agree to comply with

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
MGMR	HANNIA RIVERA	2417 FOGARTY AVE	Add
		KEY WEST FL 33040	Remove
		Maria de la companya del companya de la companya del companya de la companya de l	Add
			Remove
		7	20 Add - 17
			Remove
	***************************************		PAdd Add
			Remove
			Remove
			Add
			Remove

GG	, 3.4.7.	re: (Attach additional sheets, if necessary.)
	,	
09/23/2013	,	
	,	•
***************************************	Signature of a member or auth	norized representative of a member
CASEY VIN	ALL	

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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