

(Requestor's Name)
(Address)
(Address)
(Ĉity/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



200304665182

18/19/17--81884--015 ★#25.86

FILLED
2317 CCT 19 P 2: 52

D SCOTT OCT 20 2017

COVER LETTER

TO: Registration S Division of Co						
BDJ ENTI	ERPRISES LLC					
SUBJECT:	Name of Lin	nited Liability Company				
	Amendment and fee(s) are sub	_				
	DUANE DECASTRO					
	,	Name of Person				
	BDJ ENTERPRISES LLC					
		Firm/Company				
	JACKSONVILLE, FL 32202					
	7	Address				
	JACKSONVILLE, FL 322	202				
City/State and Zip Code osaleh@synergylaw.us					2211 CC	
	E-mail address: (to be used for future annual report notif	ication)	6	133	
For further information	concerning this matter, please c	all:		6 6 10	ت	
OMAR SALEH		954 305-5454 at ()		ī :	; : :	Ö
Name (of Person		: Telephone Number	77. 77.	5.52	
Enclosed is a check for t	he following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Fili Certificate Certified (tadditional c	of Status		
Mall	INC ADDRESS	STDFFT/CAUDII	FD ANNUFCC.			

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

BDJ ENTERPRISES LLC				
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)			
The Articles of Organization for this Limited Liab	ility Company were tiled on 9/29/2011	ដ	ind assign	e d
Florida document number 1.11000111569	.			
This amendment is submitted to amend the following	ing:			
A. If amending name, enter the new name of th	e limited liability company here:			
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the	e abbrevia	tion "L.L.C	
Enter new principal offices address, if applicable	le:			
(Principal office address MUST BE A STREET A	ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u> </u>			
		 :		
		<u> </u>	53	
	registered office address on our records, ent	er the r	name_of	the nev
registered agent and/or the new registered office	e address nere:	3 -	-4	e a lama Procume
		t.	<u>. 5</u>	; 1
Name of New Registered Agent:				
New Registered Office Address:		r''	62	
	Enter Florida street address		വ .	
	. Florida	ţ	1.3	
•	City	Zij	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BRIAN EISELE	17 OCEAN STREET	
		JACKSONVILLE FL 32202	■ Remove
			□ Change
			□ Add
		<u> </u>	□ Remove
			Change
			Add
			☐ Remove
			☐ Change
			D'Add
			Remove
			Change
			S. P. Owadd
			Remove
			Change
			Add
			Remove
			Change

1								
· · · · · · · · · · · · · · · · · · ·								
· · · · · · · · · · · · · · · · · · ·	_ 							
					`			
					·			
								
						<u> </u>		
				 .		-		
•								
				<u> </u>				
						-		
								
								
	= == :=					<u> </u>	<u></u>	
						[7]	- 4	<u>ج</u> َرِسِ
			· · · · · · · · · · · · · · · · · · ·				- 11	<u> </u>
						r		-
ective date, if oth	er than the date d, the date must be sp	of filing:	annot be prio	cu data of fil	ing or more than	(optio	nal)	
t e: If the date inser	ted in this block do	oes not me	et the applic	cable statuto	ry filing requir	ements, this	date will r	not be listed
ument's effective of	late on the Departn	nent of Sta	ite's records	••		نتي	$\dot{\mathcal{S}}$	
						£4.	52	
record specifies	a delayed effe	ctive da	te, but no	ot an effe	ctive time, a	it 12:01 a.	.m. on t	ne earlier
ne 90th day an	er the record is	s mea.						
ed 9)2	<u>- </u>		~ <i>-</i>	`				
ed 112.	<u> </u>		<u> 201</u>	<u> </u>				
				<				
	Signal	ture of a time	mber or auth	orized repres	entative of a mer	mber		
				•) "			

Page 3 of 3

Filing Fee: \$25.00