

L11000124358

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000099800 3)))



H:30000998003ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6393

From:

Anam. Sanz
Account Name : AVILA RODRIGUEZ HERNANDEZ MENA & FERRI LLP
Account Number : 120070000135
Phone : (786)594-4102
Fax Number : (786)664-3375

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: *asanz@arhmf.com*

RECEIVED

2018 MAR 29 AM 9:42

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BH PENSAM VALLEY, LLC

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

18 MAR 29 AM 9:49

FAX AUDIT NO. H18000099800 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BH Pensam Valley, 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 November 1, 2011 and assigned
Florida document number L11000124358

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

City, Florida 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 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

FAX AUDIT NO. H180000998003

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Pensam Management Services, Inc.	777 Brickell Ave, Ste 1200	<input checked="" type="checkbox"/> Add
		Miami, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Pensam Capital, LLC	777 Brickell Ave, Ste 1200	<input type="checkbox"/> Add
		Miami, FL 33131	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BH Equities, L.L.C.	400 Locust Street, Ste 790	<input type="checkbox"/> Add
		Des Moines, IA 50309	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

18 MAR 29 AM 9:49

FAX AUDIT NO. H18000099800 3

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

18 MAR 29 AM 9:49

E. Effective date, if other than the date of filing: March 29, 2018 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated March 28, 2018



Signature of a member or authorized representative of a member

Gavin Beekman

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

FAX AUDIT NO. H18000099800 3