L12000004492

(Requestor's Name)						
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SECRETARY OF STATE

COVER LETTER

TO:		tration Section			
SUBJI	· ECT:	BEA	CH 70, LLC		
	Name of Limited Liability Company				
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
			Bruce Barkett, Esq.		
			Name of Person		
Collins, Brown, Caldwe				ravaglia Chtd.	
			Firm/Company		
756 Beachland Blvd.					
			Address		
			City/State and Zip Code		
		jmclaughlin@jmclau E-mail address: (ghlin.com & joanmclau to be used for future annual repo	ughlin@gmail.com ort notification)	
For fu	rther information	concerning this matter, please of	all:		
	John	D. McLaughlin	at (_917_)	769-6439	
Name of Person		Area Code &	Daytime Telephone Number		
Enclos	sed is a check for	the following amount:			
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is er	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Regist Divisi	LING ADDRESS: tration Section on of Corporations Box 6327	Registration	Corporations	

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT

TO FILEO SECRETARY OF STATE ARTICLES OF ORGANIZATION DIVISION OF CORPORATIONS **OF**

12 IAN 20 PH 12: 02

		, 2 0,	
BEACH 7	70 IIC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears	on our records.)	
(A Florida Limited L	liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on	1/10/12	and assigned
Florida document numberL12000004492			
Fiorida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here	; :	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Compan	y," the designation "I	LLC" or the abbreviation
Enter new principal offices address, if applicable:	300 Harbour D	Drive Unit 501A	
(Principal office address MUST BE A STREET ADDRESS)	Vero Beach, F	L 32963	
		1.5	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ur records, <u>enter (</u>	the name of the new
sequested again united the section of control water cost not	-		
Name of New Registered Agent:			
			_
New Registered Office Address:	Enter Florida street address		
		T21	•
	City	, Florida	Zip Code
New Designation of America Cignotome if changing Designation America	•		•

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 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 <u>Name</u> Address Type of Action MGMR John D. McLaughlin ☐ Add
✓ Remove 1311 Madison Avenue New York, NY 10128 MGMR Joan B. McLaughlin 1311 Madison Avenue ☐ Add Remove New York, NY 10129 MGMR John D. McLaughlin 300 Harbour Drive Unit 501A ✓ Add Vero Beach, FL 32963 ☐ Remove Joan B. McLaughlin MGMR 300 Harbour Drive Unit 501A **✓** Add Vero Beach, FL 32963 Remove \prod Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated January 12 , 2012 .

Signature of a member or authorized representative of a member

Bruce Barkett

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00