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COVER LETTER

| TO: Registration Services Division of Con | | • | ' , | |
|---|--|---|---|--|
| subject: <u>BP D</u> | VELOPMENT, LLC Name of Lim | nited Liability Company | | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | | |
| Please return all correspondent | ondence concerning this matter | to the following: | | |
| | POCCO PAGLI | APULO Name of Person | | |
| | | Firm/Company | | |
| | 70 BAHAMA CIPI | Address | | SCIAE I |
| | TAMPA, FL 33CA | City/State and Zip Code | | ASSESSED AND SERVICE OF THE PARTY OF THE PAR |
| | PPAGLIAPULO @ E-mail address: (| GMAIL.COM to be used for future annual report notif | | Section 1 |
| For further information of | concerning this matter, please co | all: | | *> |
| DANTEL D. WHIT | AKER- of Person | at (<u>Bl3</u>) <u>250-05-1</u> Area Code Daytime | Telephone Number | |
| 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) | □ \$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

| BR DEVELOPMENT, LLC (Name of the Limited Liabi (A Florid | ility Company as it now appears on our records.) da Limited Liability Company) | |
|---|--|-----------------------|
| The Articles of Organization for this Limited Liability Florida document number <u>L12</u> 0000 1905 $arphi$ | Company were filed on 2/8/12 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the lin | nited liability company here: | |
| The new name must be distinguishable and contain the words "Li | mited Liability Company." the designation "LLC" or the a | abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | A S |
| (Principal office address MUST BE A STREET ADD | ORESS) | 8 |
| | | |
| | | 7 Sec. 7 |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | <u> </u> |
| | | , = 0,m |
| B. If amending the registered agent and/or reg registered agent and/or the new registered office ad | | the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Florida | 7: 6: 1 |
| | City | 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

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 |
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| | d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear Oth day after the record is filed. | lier o |
| ated _ | ovember 15 2016. | |
| | Signature of a member or authorized representative of a member | |
| | Signature of a thember or authorized representative of a member | |

Page 3 of 3

Filing Fee: \$25.00