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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850) 222-1092

: (850)878-5368

Fax Number

**Shter the email address for this business entity to be used for future

annual	report	mailings.	Enter	only	one	email	address	please.	**
Email A	ddress:								

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BACM 2006-4 CARLOS DRIVE, LLC

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Page Count	04
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EXAMINER OCT 19 2012

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PAGE 01/04

CT CORPORATION

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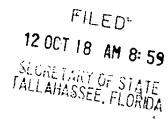
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COVER LETTER

TO ₁	Registration 8 Division of Co		·		
SUBJE	CT.	BACM 2006-	4 CARLOS DRIVĖ, LLC		
201245	· · · · · · · · · · · · · · · · · · ·	Name of Lim	uited Liability Company		
The enc	losed Articles o	f Amendment and fee(s) are su	ibmitted for filing.		
Please n	etum all corresp	undence concerning this matte	r to the following:		
		ROBIN KYLE Name of Person			
rating of retains					
		C-III	I ASSET MANAGEMENT LLC Firm/Company		
	• •				
5221 N. O'CONNOR BLVD., STE. 600 Address					
			IRVING, TX 75039		
			City/State and Zip Code		
			RKYLE@C3CP.COM		
For furth	ter information	n-man anotess: (concerning this matter, please	(to be used for third annual report notification) call:		
	1	ROBIN KYLE	at (972) 868-5388 Area Code & Daytime Telephone Number		
	Name	of Person	Area Code & Daytime Telephone Number		
Enclosed	i is a check for t	he following amount:			
\$25. 0	00 Filling Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314		ration Section on of Corporations ox 6327	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

PLOSS - 03/46/2009 CT System Duline

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



BACM 2006-4 CAF			
(Name of the Limited Liability Comps (A Florida Limited)	ny as It now appo Liability Company	grs on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number	/ were filed on	FEBRUARY 9, 2012 and assigned	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	ollity company b	<u>ere</u> :	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Com	pany," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	C-III ASSET M	MANAGEMENT LLC	
(Principal office address MUST BE A STREET ADDRESS)	5221 N. O'CON	NOR BLVD., STE, 600	
,	IRVING, TX 75039		
Enter new mailing address, if applicable:	C-III ASSET M	ANAGEMENT LLC	
(Mailing address MAY BE A POST OFFICE BOX)	5221 N, O'CONNOR BLVD., STE, 600		
IRVING, TX 75039		5039	
New Registered Office Address:	<u>e</u> :		
New Abgained Vince Address.	Entar Florida street address		
	, Florida		
	City	Zip Code	
New Registered Agent's Signature, it changing Registered Agents hereby accept the appointment as registered agent and agra he provisions of all statutes relative to the proper and compa accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered affice company has been notified in writing of this change.	ee to act in this (lete performance provided for in C	e of my duties, and I am familiar with and Thapter 608, F.S. Or, if this document is	
	alne Registered 4 -	ent, Signature of New Registered Agent	
		AND SHOULDEST OF LICH VENTILISES VICES	
Page I	01 2	•	

PAGE 03/04

14.855 - 05/06/2009 C T System Online

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
MGR	C-III ASSET MANAGEMENT LLC	5221 N.O'CONNOR BLVD., STE, 600 IRVING. TX 35039	X Add Remove
MGR	LNR PARTNERS, LLC	1601 WASHINGTON AVE., STE. 700 MIAMI BRACTI, FL. 33139	Add Remove
······································			Add Remove
			Add Remove
<u> </u>	,		Add Remove
			Add
D. If amen	ding any other information, enter chang	e(x) here: (Attach additional sheets, if necessary)
·			
Dated	OCTOBBR 18 20	Secretary of GU Asset Wana	<u>cernent-UC; its</u>
	Typed	ROBIN KYLE or printed name of signee	- Chapt don't
	••	Page 2 of 2	

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FL055 - 03/06/2009 C T System Outline