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COVER LETTER

TO: **Registration Section** Division of Corporations

BF Kennedy, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	James Paga	ano	
		Name of Person	
		Firm/Company	
	7772 NW 55	5th Place	::1 N
		Address	
	Coral Spring	gs, FL 33067	2013 JAN 22 SEGRETAR TALLAHASS
		City/State and Zip Code	SS 2
	BRENDA@PLT		
	E-mail address:	to be used for future annual report not	ification)
For further information of	concerning this matter, please	call:	ification)
Brenda Ke	gley	954 ₃ 575-86	
Name o	of Person	Area Code & Dayti	me Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	□\$30.00 Filing Fee &	□\$55.00 Filing Fee &	■\$60.00 Filing Fee,

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certificate of Status &

(additional copy is enclosed)

Certified Copy

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

BF Kennedy, LLC					
(Name of the Limited Lia (A Flo	bility Compar rida Limited L	i <mark>y as it now appears on our rec</mark> iability Company)	ords.)		
The Articles of Organization for this Limited Liabi	lity Company	were filed on <u>02/10/2012</u>	a	nd assigne	:d
Florida document number L12000021117					
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	e limited liab	ility company here:			
SB Gainesville LLC					
The new name must be distinguishable and end with th "L.L.C."	e words "Limi	ted Liability Company," the desi	gnation "LLC"		viation
Enter new principal offices address, if applicable	e:	7772 NW 55th Place		2013	
(Principal office address MUST BE A STREET A	DDRESS)	Coral Springs, FL 330)67 <u>}</u>	27	Mr by ffee
) * U1 (G	22	<u> </u>
			វិស ស្រែ	ə 🖜	11
Enter new mailing address, if applicable:		7772 NW 55th Place	17. 		Į ~~····
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>	Coral Springs, FL 330)67	े का	
					
B. If amending the registered agent and/or registered agent and/or the new registered office			s, <u>enter the n</u>	ame of th	<u>ie new</u>
Name of New Registered Agent:	James Pag	ano			
New Registered Office Address:	7772 NW 5	5th Place			
		Enter Florida .	street address	•	
	Coral Sprin	igs . F	lorida <u>33067</u>	ı	
		City	Zi	p Code	
New Registered Agent's Signature, if changing Reg	istered 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 bereby confirm that the limited liability company has been notified in writing of this change.

ing 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:

<u>Title</u>	Name	<u>Address</u>	Type of Action
			Add
			Remove
			in the state of th
			Add
			Remove
			25 22
			Remove
			Remove
			Add
			Remove
			Add
			Remove

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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_	A
ted (Fanisary 16, 2013.
	The residence of the second se
	Signature of a member or authorized representative of a member
	TAMES PAGANO Typed or printed name of signee
	//
	Page 3 of 3
	Filing Fee: \$25.00

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FALLAHASSEE FLORING

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