

L120000023470

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
SEP 14 2012
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Bonita Beach Realty 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:

Ann Bonilla

Name of Person

Bonita Beach Realty LLC

Firm/Company

989 E Valley Dr

Address

Bonita Springs, FL 34134

City/State and Zip Code

cia.1@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ann Bonilla

Name of Person

at (239)

963-5075

Area Code & Daytime Telephone Number

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Enclosed is a check for the 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**

Bonita Beach Realty 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 Feb. 17, 2012 and assigned
Florida document number 12000023470.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

Ann Bonilla

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

989 E Valley Dr.

(Mailing address MAY BE A POST OFFICE BOX)

Bonita Springs, FL 34134

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:

Ann Bonilla

New Registered Office Address:

989 E Valley Dr

Enter Florida street address

Bonita Springs

Florida

34134

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 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.

Ann Bonilla
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

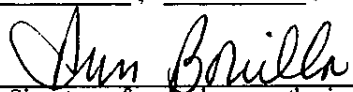
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Mgrm</u>	<u>Candice Bonilla</u>	<u>98 E Valley Dr</u> <u>Bonita Springs, FL 34134</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>mgrm</u>	<u>John M Bonilla</u>	<u>752 Foundry St</u> <u>So Easton, Ma 02375</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

change to only Ann Bonilla as Manager & member with Florida address

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
APPROVED
AND
FILED

Dated Sept. 10, 2012



Signature of a member or authorized representative of a member

Ann Bonilla

Typed or printed name of signee