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EXAMINER



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COVER-LETTER

Division of Cor	porations			
SUBJECT:	BDI INNO	OVATIONS LLC		•
	Name of Limit	ed Liability Company	· · · · · · · · · · · · · · · · · · ·	•
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:	·	
		Barry Biondo		
		Name of Person		
	BD	I INNOVATIONS LLC		
		Firm/Company		
	5	704 Lago Del Sol DR		
		Address		
	La	ake Worth, FL 33449		
		City/State and Zip Code		
	E-mail address: (t	ybiondo@bellsouth.net o be used for future annual report no	otification)	
For further information of	concerning this matter, please c	all:		
В	arry Biondo	at (561)	702-0075	
Name of Person		Area Code & Day	time 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 enclo	sed) Certified	ite of Status &

MAILING ADDRESS:

TO:

Registration Section

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

***************************************	City	, Florida	Zip Code
	Enter Florida street address		
New Registered Office Address:			
Name of New Registered Agent:			
B. If amending the registered agent and/or registered agent and/or the new registered office addr	ered office address on ess here:	our records, enter	the name of the new
Whente dames was a real of office now			32
(Malting address MAY BE A POST OFFICE BOX)			<u> </u>
Enter new mailing address, if applicable:			-I PM
(Principal office address MUST BE A STREET ADDRI	ESIS)		AAR OCT T
Enter new principal offices address, if applicable:			<u> </u>
The new name must be distinguishable and ead with the word "L.L.C."	*Limited Liability Compa	my," the designation "	LLC" or the abbreviation
A. If amending name, enter the new name of the limit	ed liability company ber	<u>:e</u> :	
This amendment is submitted to amend the following:			
Florida document numberL12000030794	•		
The Articles of Organization for this Limited Liability Con	mpany were filed on	3/15/2012	and assigned
(A Florida Liz	nited Liability Company)		
(Name of the Limited Liability C (A Florida Lin	OVATIONS LLC	s on our records.)	

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 Acout, Signature of New Registered Acout

FROM:

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 Name

<u>Title</u>	Name	Address	Type of Action
MGRM	Charles Biondo	8851 HEARTSONG TER BOYNTON BEACH FL 33473	Add Remove
·			Add Remove
· · ·			Add Remove
			Add Remove
			Add Remove
			Add
D. If amen	ding any other information, enter chan	ge(s) here: (Auach additional sheets, if necessary.)	
<u>-</u>			<u>-</u>
			
Dated	,	012	and a state of the
		er or authorized representative of a member	
	Туре	Barry Biondo d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00