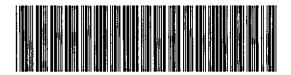
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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number))
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
		;
	<u>-</u> .	

Office Use Only



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04/02/15--01024--002 **30.00

APR 2 0 2014 C. CARROTHERS To: Florida Department of State, Division of Corporations

Re: Amendment of the Articles of Organization for "Bear Lake Capital, LLC."

Brian Carey

Bear Lake Capital, LLC.

1047 Mockingbird Circle

Winter Haven, FL 33884

bearlakecapital@gmail.com

(917) 434-3225

The Articles of Organization for this LLC were filed on 4/27/12 and assigned Florida document number L12000057244

Please remove Rachel Needle from the LLC and add Brian Carey as the Manager and Registered Agent.

Thank you.

Best Regards,

Brian Carey

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	Sea late Name of Limit	ted Liability Company	<u>C</u>
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	dence concerning this matter	to the following:	
·	Brio	n Carey	
	Bear Lak	Name of Person Capital, LL Firm/Company	. C
,	104710	cknybird Cir	cte
	Dearlakeca E-mail address: (1	City/State and Zip Code p:tal@1ma/lean b be used for futfire annual report notific	2884
For firsther information or		•	aciony
Rr 1an	ncerning this matter, please ca		3225
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	_		
\$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)

TO:

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

Bear lake	Captul IIC
(Name of the Limited Liability Com (A Florida Limite	npany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Compa	ny were filed on $\frac{427/12}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited li</u>	ability company here:
The new name must be distinguishable and end with the words "Limited L	iability Company," the designation "LLC" or the abbreviation: "L'L.C."
Enter new principal offices address, if applicable:	Brian Carey SA N
(Principal office address MUST BE A STREET ADDRESS)	
	Winter Haven, Pl 33984 551 N
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Winter Maren 77 33884
Maning university MAT BE A FOST OFFICE BOX)	Winter Maren, 11 33707
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	office address on our records, enter the name of the new
Name of New Registered Agent:	ian Carey
New Registered Office Address: 1047	Mockinghind Cirule Enter Florida street address
_ Wi	Her Holven, Florida 33784 City Zip Code
	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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	lanager authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Brian Carey	Brian Carry	ja ;Add
		1047 Mockingbird Circle Winter Maven, FL 3388	☐ Remove
		Winter Haven, FL 3388	4
More	Rachel Needle	2639 Mohawk Circle	
		Westralm Beh, Fr 334	1 Remove
			<u></u>
			🗆 Add
			Remove
			□ Add
			Remove
			□ Add
			Remove
			
			Add
			Remove

D. If amend	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Please remove Rachel reelle
	from This company entirely
<u></u>	
(The effective	re date, if other than the date of filing:
Dated	3 191, 2015.
	Rank Acall
·	Signature of a member or authorized representative of a member Rachel Acedle Typed or printed page of signes

Page 3 of 3

Filing Fee: \$25.00