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(Requestor's Name)
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06/08/20 -01022 -016 ++25.00

J. -3 F. 12: 15

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: BBT PROP	, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspor	idence concerning this matter	to the following:	
	DENNIS T KATSOULIS		
		Name of Person	
	BBT PROP, LLC		
		Firm/Company	
	3250 NE 1ST AVENUE	, APT 543	
		Address	
	MIAMI, FL 33137		
		City/State and Zip Code	
	DENNIS@BBTODAYING		
		to be used for future annual report not	fication)
For further information co	ncerning this matter, please c	all:	
DENNIS T KATSOULIS	3	at (305) 744-2242 Area Code Daytim	2
Name of	Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	e 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 S		Street Address: Registration Se	ction
Registration Section Division of Corporations		Division of Cor	
P.O. Box 6327		The Centre of T	
Tallahassee, F	L32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020 - -8 PM 12: 4.9

BBT PROP, 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 Comp	pany were filed on 09/12/2012	and assigned	
Florida document number L12000116686	•		
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 contain the words "Limited I	Liability Company," the designation	"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	5)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			
B. If amending the registered agent and/or registered office and/or the new registered office address here:	ice address on our records, <u>e</u>	nter the name of the new registere	
Name of New Registered Agent:		<u>. </u>	
New Registered Office Address:	Enter Florida street a	ddress	
	City		
New Registered Agent's Signature, if changing Registered Agent	ent:		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent being filed to merely reflect a change in the registered of a company has been notified in writing of this change.	lete performance of my dutie as provided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is	
ITE	Changing Registered Agent, Signat	ure of New Registered Agent	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	PRISCILLA RUSTIGUELA MARTINS	3250 NE 1ST AVENUE, APT 543, MIAMI, FL	(X Add
		33137	□Remove
			①Change
·			□Add
			□Remove
			□Change
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			□Remove
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			□Remove
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,, 11 AIII	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an eff	ive date, if other than the date of filing: JUNE 1, 2018 (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
cord is fi	
Dated	04/04/2020
	Signature of a member or authorized representative of a member
	DENNIS T KATSOULIS

Filing Fee: \$25.00

Typed or printed name of signee