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COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT:	ВО	E VII, LLC		
Sobolic 1.		ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	J	James M. DuRant, Jr.		
		Name of Person		
	Воу	Boyd, DuRant & Sliger, P.L.		
		Firm/Company		
	140	1407 Piedmont Drive East		
	Address			
	Tall	ahassee, Florida 32308		
City/State and Zip Code				
	E-mail address: (fication)		
For further information co	oncerning this matter, please o	•		
	ana Romig	at (<u>850</u>)	386-2171	
Name o	f Person	Area Code & Daytin	ne Telephone Number	
Enclosed is a check for the	ne 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		STREET/COUR Registration Section		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOE VII, 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 September 21, 2012 and assigned
Florida document number September 21, 2012
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
BOEVII, LLC
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:
Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the ne registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address Florida 70
City Sip 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.

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 **Title** <u>Name</u> Address **Type of Action** Add Remove ☐ Add Remove ☐ Add Remove ∏ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) October 4 2012 Signature of a member or authorized representative of a member James M. DuRant, Jr. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00