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COVER LETTER

TO: Registration Section
Division of Corporations

BH III Partners Holdings 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:

Jarret Freedman

Name of Person

BH III Management LLC

Firm/Company

2711 S. Ocean Drive #2404

Address

Hollywood, FL 33019

City/State and Zip Code

jarret@bh3llc.com

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

For further information concerning this matter, please call:

jarret freedman

954,416-3140

Name of Person

Area Code & Daytime Telephone Number

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

BH III Partners Holdings LLC			
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our i d Liability Company)	records.)	
The Articles of Organization for this Limited Liability Compa	my were filed on 9/21/12	and assigned	
Florida document number L12000121031			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
BH3 Partners Holdings LLC			
The new name must be distinguishable and end with the words "Li"L.L.C."	imited Liability Company," the do	esignation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
		SA 1 T	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		30 RID.	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		ds, enter the name of the new	
			
Name of New Registered Agent:			
New Registered Office Address:		V	
	Enter Florid	Enter Florida street address	
	,	Florida	
	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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
		**************************************	Add	
			Remove	
-			Add	
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	·		Add Remove.	
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			E STATE SANG	
			Remove	
	4-84-3-4-3-4-3-4-3-4-3-4-3-4-3-4-3-4-3-4		Add	
			Remove	
			Add	
			Remove	

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
Dated _	
	Whelhush
	Signature of a member or authorized representative of a member
	Daniel Lebensohn
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE

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