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C. KIUZEN

COVER LETTER

TO: Re	gistration Se vision of Cor	ction porations		
SUBJECT:		orise Group LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclose	d Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		Alexander Baptiste		
		BCC Enterprise Group LL	Name of Person	
		200 South Biscayne Blvd S	Firm/Company Suite 2790	
٠		Miami, FL 33131	Address	
		becenterprisegroup@gmail.	City/State and Zip Code com	··· -
		E-mail address: (to be used for future annual report notific	cation)
For further i	nformation co	oncerning this matter, please ca	all:	
Alexander I	Baptiste		786 385-1367	
	Name of	Person		Telephone Number
Enclosed is	a check for th	e following amount:		
□ \$ 25.00 1	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

BCC Enterprise Group LLC		
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records. Liability Company))
ne Articles of Organization for this Limited Liability Company orida document number L12000134700	were filed on 10/23/2012	and assigned
is amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	oility company here:	
		<u> </u>
e new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	· ~ —
nter new principal offices address, if applicable:	200 South Biscayne Blvd	AH AUS F
rincipal office address MUST BE A STREET ADDRESS)	Suite 2790	-5 -5 SSE
	Miami, FL 33131	mo Fr
nter new mailing address, if applicable:	1840 NW 186th Street) STATE LORID
failing address MAY BE A POST OFFICE BOX)	Miami Gardens, FL 33056	
If amending the registered agent and/or registered o zistered agent and/or the new registered office address her Name of New Registered Agent:		enter the name of the
New Registered Office Address:	Enter Florida street address	
	, Flor	rida Zip Code
	Cuy	zap Coure

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

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>	Name	Address	Type of Action
MGRM	ALEXANDER BAPTISTE	200 South Biscayne Boulevard Suite 2790	₩ Add
		Miami, FL 33131	□ Remove
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			□ Remove
			Change
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			————— ☐ Change
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n elle ote:	ve date, if other than the date of filing:	5.0207 (3)(b) ted as the
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli 90th day after the record is filed.	er of:
ited .	2019 Col 9 Sprinting of a member or authorized representative of a member ALEXANDER BAPTISTE	
	\mathcal{O}_{A}	

Typed or printed name of signee