112000147541

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C. GOLDEN

JUL - 8 2019

COVER LETTER

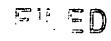
FO: Registration Sec Division of Corp			
SUBJECT:		nobilien 1, LLC ited Liability Company	
		, , ,	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
		Michael Oliver	
		Name of Person	
	1	BMR Immobilien, LLC Firm/Company	
	558 V	V. New England Ave. Ste 250 Address)
	\	Vinter Park, FL 32789	
	lance with aline (house and	City/State and Zip Code	
	E-mail address: (oliaadvisors.com to be used for future annual report notif	lication)
For further information co	oncerning this matter, please ca	all:	
Lance Re	eibeling Person	at (<u>407</u>) <u>792-8902</u> Area Code Daytime	e Telephone Number
		· · · · · · · · · · · · · · · · · · ·	
Enclosed is a check for th	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 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



2019 JUN 24 PM 1:30

BMR Immobilien 1, LLC (Name of the Limited Liability Compa (A Florida Limited I	inv as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L12000147541</u> .	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	vility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable: 558 W. New England Ave. Ste 250	
(Principal office address MUST BE A STREET ADDRESS)	Winter Park, FL 32789
Enter new mailing address, if applicable:	558 W. New England Ave. Ste 250
(Mailing address MAY BE A POST OFFICE BOX)	Winter Park, FL 32789
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office 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 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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michael Oliver	1362 Palm Ave	DbA 🗖
		Winter Park, FL 32789	■ Remove
			Change
MGR	Michael Oliver	558 W. New England Ave. Ste 250	■ Add
		Winter Park, FL 32789	□ Remove
			🗀 Change
			□ Remove
			Change
			Add
			Remove
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			□ Remove
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	- · · · · · · · · · · · · · · · · · · ·		🗆 Add
			☐ Remove
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ective date, if othe	r than the date of '	filing:		(ontional)	
effective date is listed	the date must be specified in this lateral and	ic and cannot be prior to	o date of filing or more th	optional) an 90 days after tiling.) Purs	suant to 605.0207
	ed in this block does l ite on the Department		ole statutory ming req	uirements, this date will	not be listed as
	a delayed effecti er the record is fi		an effective time	, at 12:01 a.m. on t	he earlier o
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		2019			
ed June 20th			- ·		
ed June 20th	Me	1 wes	_ `		

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Typed or printed name of signee

Filing Fee: \$25.00