## L12000 152 357

(Ke	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	<del></del>
•	· · · · · · · · · · · · · · · · · · ·	
(Cit	ty/State/Zip/Phone	<del>:</del> #)
<b>—</b>	<b>—</b>	<b>—</b>
☐ PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
,	<b>-</b>	··- <b>·</b>
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Γ		
Special Instructions to	Filing Officer:	
·		
		ļ
<del></del>		

Office Use Only



800289175758

09/22/16--01027--017 \*\*25.00

16 OCT 11 PHI2: 02

OCT 1 2 2013

Y SULKER

## **COVER LETTER**

TO:	Registration Sec Division of Corp				
SUBJE	CT:BGM1_	LLC			
JOBOL	C1	Name of Limit	ted Liability Company		<del></del>
The enc	losed Articles of A	mendment and fee(s) are subn	nitted for filing.		
Please r	eturn all correspon	dence concerning this matter to	o the following:		
		A	Adam R. Seligman, F	Esq.	
			Name of Person		
			Ward Damon PL		
			Firm/Company		<del>,</del>
			4420 Beacon Circl	e	
			Address		
		W	est Palm Beach, FL 3	33407	
		-	City/State and Zip Code		
		ASe E-mail address: (to	ligman@warddamo: o be used for future annual	n.com report notification	on)
For furt	her information co	ncerning this matter, please ca	11:		
Ada	am R. Seligman,	<u> </u>	at ( <u>561</u> )	842-3000_	
	Name of	Person	Area Code	Daytime Tele	ephone Number
Enclose	ed 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 en		□ \$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



September 23, 2016

ADAM R SELIGMAN, ESQ 4420 BEACON CIRCLE WEST PALM BEACH, FL 33407 US

SUBJECT: BGM1 LLC

Ref. Number: L12000152357

We have received your document for BGM1 LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 016A00020564

## ARTICLE OF AMENT TO ARTICLES OF ORGANIZATION OF

	BGM1 LLC	
(Name of the Limited I	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabi	lity Company were filed on December 6, 2012	and assigned
Florida document number <u>L12000152357</u>	<u> </u>	
This amendment is submitted to amend the followi	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	X)	
17. W. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
		5
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter	
		-
Name of New Registered Agent:		3
N D 1 1000 411		
New Registered Office Address:	Enter Florida street address 2	2 00
	, 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, 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
MGR	Bella Magazanic	28/43 Moshe Dayan Street, Yehud, IL 56460	□ Add
			■ Remove
			Change
			□ Add
			□ Remove
			Change
			□ Add
			Remove
		175 134 571	Add
			_□Æemove N
			_□ Change
			_□ Add
			_□ Remove
			_□ Change
			_□ Add
			_□ Remove
			_□ Change

		<u> </u>			
	<b></b>				
			.,,		
	<u> </u>				
		<u></u>			
			<del></del>		
	-				=
	······································			<u> </u>	
		<del></del>	E. T.	****	
			CT		-~-
			6		., .
ffective date, if other than the date of filing:  an effective date is listed, the date must be specific and cannot be prior that it is lock does not meet the application occument's effective date on the Department of State's records.					
		6 40.04 -	m. on f	he earli	er of
	t an effective tim	e, at 12:01 a.			
The 90th day after the record is filed.		e, at 12:01 a.			
The 90th day after the record is filed.  Dated					

Page 3 of 3

Filing Fee: \$25.00