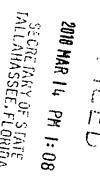


(Re	questor's Name)	<u></u>
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	⇒ #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	<u>-</u>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





03/14/18--01022--015 **25.00



COVER LETTER

TO:		istration Section sion of Corpor		3.96	-#	
CHO IE		Detail Pro, LL				
SUBJE	.CI:			ed Liability Company		
			nendment and fee(s) are submence concerning this matter to			
			Bryan Geoffrey			
			, , , , , , , , , , , , , , , , , , ,	Name of Person		
			Geoffrey Management, LLC			
Firm/Company						
			33493 W. 14 Mile Road Sui	ite 100		
Address						
			FARMINGTON HILLS, M	11 48331		
				City/State and Zip Cod	e	
			bmgeoffrey@yahoo.com	o be used for future annua	1	
For fur	ther in	oformation cond	e-mail address: (to		n report notification	3H)
Bryan			, r		965 2000	
		Name of Pe	erson	at (248 Area Code)	Daytime Tel	ephone Number
Enclose	ed is a	check for the	following amount:			
\$25	5.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is e		□ \$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

Detail Pro, LLC		
(Name of the Limited L (A F	iability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabil Florida document number L12000161449	hity Company were filed on 12/28/2012	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
BMGDD Detail, LLC		
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or	he abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		iter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		SE
	Enter Florida street address , Florid	OF ST
_	City	Zip Code
New Registered Agent's Signature if changing Regi	stored Avent.)8

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

<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
			Change
			□ Add
		-	□ Remove
			□ Change
			□ Add
			☐ Remove
			Change
			□ Remove
			☐ Change
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 If the date inserted in this 	he date of filing: must be specific and cannot be p block does not meet the ap be Department of State's reco	plicable statutory filing	e than 90 days after filing requirements, this date	.) Pursuant to 605.
ecord specifies a delay e 90th day after the r	yed effective date, but ecord is filed.	not an effective tir	ne, at 12:01 a.m.	on the earlie
d March 5	, 2018	·		
		authorized representative o		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00