

#L 13000034837

(Requestor's Name)

(Address)

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13 JUN 14 PM 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

JUN 17 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **BCHJ MAYPORT, LLC**

The enclosed Articles of Amendment and fee(s) are submitted for Filing. Please return all correspondence concerning this matter to the following:

Carmen J. Marzella, Esq.
Shanahan Law Group, PLLC
128 E. Hargett Street
Sutie 300
Raleigh, NC 27601

E-mail address: cmarzella@shanahanlawgroup.com
(to be used for future annual report notification)

For further information concerning this matter, please call:
Carmen J. Marzella, Esq at 919-653-8800.

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
Tallahassee, FL 32301

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BCHJ MAYPORT, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on **MARCH 14, 2013** and assigned Florida document number 413000034 837

This amendment is submitted to amend the following: **TO CHANGE THE NAME OF THE ENTITY.**

A. If amending name, enter the new name of the limited liability company here:

BACK COVE MANAGEMENT, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: N/A

Enter new mailing address, if applicable: N/A

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: N/A

Name of New Registered Agent: N/A

New Registered Office Address: N/A

New Registered Agent's Signature, if changing Registered Agent: N/A

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

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

MGR = Manager

MGRM = Managing Member

TITLE	NAME	ADDRESS	TYPE OF ACTION
MGRM	BACK COVE HOLDINGS, LLC	3929 HENDRICKS AVENUE JACKSONVILLE, FL	REMOVE
MGRM	DEFOREST E. MARTIN, III	3929 HENDRICKS AVENUE JACKSONVILLE, FL	ADD
MGRM	BRIAN KINSLEY	3929 HENDRICKS AVENUE JACKSONVILLE, FL	ADD
MGRM	KAREN McCAULIFF	3929 HENDRICKS AVENUE JACKSONVILLE, FL	ADD

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*



DeForest E. Martin, III
Member / Manager

DATED: June 12, 2013

Filing Fee: \$25.00