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## **COVER LETTER**

1.7

TO: Registration Section Division of Corporations
SUBJECT: OKOROWAT BAYUU  Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:
Chris Bridgeran Name of Person  Y- Wayne Clarce Firm/Company  8463 Weather Jone Ct  Address  City/State and Zip Code  Christ & Foundation Local Lings  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person)  at (904, 638 2370)  Area Code & Daytime Telephone Number  Office September 1997  Office September
Enclosed is a check for the following amount:
\$25.00 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  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

OKOROWAI BAY ed 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 Florida document number L 13000063800 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street 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 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 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 <u>Address</u> **Type of Action** <u>Title</u> <u>Name</u> Add  $\overline{\Sigma}_{22}$ PRemove

Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	Correcting original Filing error
•	
-	
•	
Dated C	Oct 3 2013
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	Page 3 of 3
	Chris Bridgerson as President of BFR Management Inc. Manager Ottoromai Ray U.C.
•	of BFR Management Inc,
	Manager Otroromai Bay al.

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ANY SEE STATE