113000077925

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
- (Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

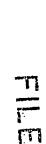


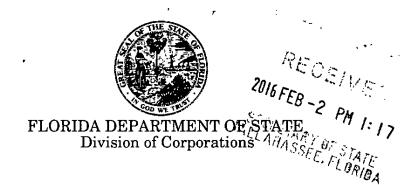
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SECRETARY OF STATE

FEB 0 2 2016). BRUCH





January 19, 2016

JRAMG MONTEAGUDO P.O. BOX 2784 KEY LARGO, FL 33037

SUBJECT: BAHAMA LOT, LLC Ref. Number: L13000077925

We have received your document for BAHAMA LOT, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience:

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 916A0000 130 5

COVER LETTER

TO: Registration So Division of Con				
SUBJECT:	Bahama Lo- Name of Lin	LLC nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Isan	4 Monteagudo Name of Person		
	Baha	Firm/Company		
	P. U. T	30× 2784 Address		
	Key L	City/State and Zip Code	201 FAL	
		to be used for future annual report notif	ALLAHASS FEB -	77
For further information c	oncerning this matter, please c	all:	m-< -	##C**
Alex Ho Name o	ntoagud f Person	at (305) 453 - Area Code Daytime	3 43 9 E Telephone Number 5	C C
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	Sample 20,000 Status Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is et	atus &

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

Bahama l	tot uc
(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liabilit Florida document number <u>L 1300007792</u>	y Company were filed on <u>May 28, 2013</u> and assigned <u>5</u> .
This amendment is submitted to amend the following	Ţ.
A. If amending name, enter the new name of the l	limited liability company here:
The new name must be distinguishable and contain 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 AD	DRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records, enter the new of the new address here:
	मुन गु
New Registered Office Address:	Enter Florida street address 20.00 E
	Florida sirvei dauress
	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 manag	e, enter the title, n	ame, and addres	s of each person	being added
or removed from our records:				

MGR = Manager

AMBR = Authorized Member <u>Title</u> <u>Name</u> Address **Type of Action** Alexander Montagudo P.O. Box 2784 MGR __**X**Add Key Large Fr 33037 ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add Remove ☐ Remove ☐ Change □ Add ☐ Remove _□ Change

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etive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be perfective date inserted in this block does not meet the appendix's effective date on the Department of State's recomment's	plicable statut	ling or more than 90 cory filing requirement	lays after fents, this	iling.) Pu date wil	rsuant to 60 l not be lis
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ecord specifies a delayed effective date, but e 90th day after the record is filed.	not an effe	ctive time, at 1	2:01 a.	m. on	the earl
d 1-30-2016,	·				
Signature of a member of a					
		antativa of a mamba			

Page 3 of 3

Filing Fee: \$25.00