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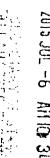
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### **COVER LETTER**

Div	ision of Corpo	orations			
SUBJECT:	Business Adn	ninistratrion Growth LLC	,	• •	
Sobsider.		Name of Limit	ed Liability Company		
The enclosed	l Articles of A	mendment and fee(s) are subm	nitted for filing.		
Please return	all correspond	lence concerning this matter to	o the following:		
		Joseph Hilton			
Name of Person					
Fresh Start					
Firm/Company					
3599 Hudson Lane					
Address					
Boynton Beach, FL 33436					
City/State and Zip Code					
		E-mail address: (to	be used for future annual report notificat	tion)	
For further in	nformation cor	cerning this matter, please cal	1:		
Adam Forma	an (	Melle	631 9883990 at ()		
	Name of I	Persón.	Area Code Daytime Te	elephone Number	
Enclosed is a	a check for the	following amount:			
■ \$25.00 F	iling 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:

TO:

Registration Section

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

Business Administration Growth I				
(Name of the Din	ited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)			
The Articles of Organization for this Limited I	Liability Company were filed on 5/30/2015	ar	nd assig	med
This amendment is submitted to amend the fo				
A. If amending name, enter the new name	of the limited liability company here:			
The new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC" or the	e abbreviati	on "L.L.	C."
Enter new principal offices address, if appli	icable:			
Principal office address MUST BE A STRE				
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICI	E ROY			
maung uduress MAT BE A FOST OFFICE	<u></u>			
B. If amending the registered agent and	d/or registered office address on our records, <u>en</u>	ter the n	2015e o	f the ne
registered agent and/or the new registered		10 f	ŞΞ	talest.
			9	110.00
Name of New Registered Agent:	Joseph Hilton	77 p 17 77 t	<b>-</b>	
	<del>-</del>	7	\$	
New Registered Office Address:	Enter Florida street address	7.	<u> </u>	
	, Florida			
	City , Florida		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>	<u>Name</u>	Address	Type of Action
Member	Joseph Hilton	3599 Hudson Lane Boca Raton, FL	Add
			□ Remove
			Change
Member	Kenneth Dunn	1489 W Palmetto Park Rd.,	
			☐ Remove
			Change
			□ Add
			□ Remove
			Change
			D'Add
			Remove
			Change Change
	<del></del>		□ Add
			Remove
			□ Change
***************************************		<del></del>	
			☐ Remove
			☐ Change

Effective date, if other than the date of filing:  7/1/2015  (Optional)  (Opti	If amending any other infor	mation, enter ch	ange(s) here:	(Attach addition	al sheets, if necess	ary.)	
Effective date, if other than the date of filing:    7/1/2015     (optional)		•					<del></del>
Effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The ercord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier The 90th day after the record is filed.  Dated  July 1  Signature of member of authorized representative of a member	· · · · · · · · · · · · · · · · · · ·	r					
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Filing Fee: \$25.00