L13000096741

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	(Requestor's Name)			
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	(Business Entity Name)			
<u></u>	(Document Number)			
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Advanced Incorporating Service

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1317 California Street P.O. Box 20396 Tallahassee, FL 32316

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Phone: 850-222-CORP Fax: 850-575-2724 Email: wlopez@aisincfl.com Website: <u>www.aisincfl.com</u>

NAME OF ENTITY
BDG Hancock, LLC
FOR OFFICE USE ONLY
PICK ONE:
CERTIFIED COPY XX PHOTOCOPYC.U.S.
FILING:
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FOREIGN QUALIFICATIONJUDGMENT LIEN
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Of
APOSTILLE/NOTARY CERTIFICATION REQUEST:
Country
Amount of Documents
DATE 1/5/24 TIME
Notes:



January 8, 2024

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ADVANCED INCORPORATING SERVICE

SUBJECT: BDG HANCOCK, LLC Ref. Number: L13000096741

We have received your document for BDG HANCOCK, LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The AMBR Michelle Chira Revocable Trust is not currently listed. Is she being added? Please indicate Add is being added.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 924A00000442

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2024 JAN -5 AM 9: 25

TALLAHASSEE, FLORIDA

BDG Hancock, 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 <u>07/08/2013</u> and assigned Florida document number L13000096741.

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 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 ADDRESS) 800 Highland Ave Ste 200 Orlando, FL 32803

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 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.

<u>Same</u>

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being</u> added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Tulane Green Wave, LLC	800 Highland Ave. Orlando Fl, 32803	HAdd
MGR	ORANGE AND BLUE MANAGEMENT, LLC	800 Highland Ave. Orlando Fl, 32803	Remove
AMBR	Michelle Chira Revocable Trust	800 Highland Ave. Orlando Fl, 32803	JAW

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

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

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E. Effective date, if other than the date of filing: <u>December 15th, 2023 (optional)</u> (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 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	v	
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	Signaphre of a member or authorized representative of a member	
_	James Kassi	
	Typed or printed name of signce	

Filing Fee: \$25.00