

L13000107978

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
APR 28

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ACP SPORTS LLC

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:

Sandra Navarro-Garcia

Name of Person

Sandra Navarro-Garcia, P.A.

Firm/Company

7951 SW 40th Street, Suite 202

Address

Miami, Florida 33155

City/State and Zip Code

sandra@snglaw.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandra Navarro-Garcia

305

264-7500

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

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

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

ACP SPORTS LLC

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

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The Articles of Organization for this Limited Liability Company were filed on 7/30/13 and assigned
Florida document number L13000107978.

This amendment is submitted to amend the following:

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

BO770 I, LLC

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:

4770 Biscayne Blvd., Suite 900

(Principal office address MUST BE A STREET ADDRESS)

Miami, FL. 33137

Enter new mailing address, if applicable:

4770 Biscayne Blvd., Suite 900

(Mailing address MAY BE A POST OFFICE BOX)

Miami, FL. 33137

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:

Sandra Navarro-Garcia

New Registered Office Address:

7951 SW 40th Street, Suite 202

Enter Florida street address

Miami

Florida 33155

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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Fernando Zulueta	6457 Sunset Drive	<input type="checkbox"/> Add
		Miami, FL. 33143	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Michael Calderon	4470 Biscayne Blvd., Suite 900	<input checked="" type="checkbox"/> Add
		Miami, FL. 33137	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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Note: 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.

(b) The 90th day after the record is filed.

4/19/16

Signature of a member or authorized representative of a member

michael Calderon

Typed or printed name of signee