

LB000116958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700281908287

02/11/16--01008--011 **25.00

FILED
16 FEB 11 PM 5:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 12 2016
S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SILVER SPRINGS MANAGEMENT, 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:

SVEN E. NELSON III

Name of Person

BG CAPITAL MANAGEMENT

Firm/Company

5656E. SILVER SPRINGS BLVD

Address

SILVER SPRINGS FL 34488

City/State and Zip Code

SNELSON@BGCAP.COM

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

FILED
16 FEB 11 PM 5:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

SVEN E. NELSON III

813 546-3359
at ()
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

SILVER SPRINGS MANAGEMENT, 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 08/19/2013 and assigned
Florida document number L13000116958.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5656E. SILVER SPRINGS BLVD

SILVER SPRINGS FL 34488

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:

SVENE. NELSON, III

New Registered Office Address:

5656E. SILVER SPRINGS BLVD

Enter Florida street address

SILVER SPRINGS

Florida 34488

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	SVEN E. NELSON, III	5656 E. SILVER SPRINGS BLVD	<input checked="" type="checkbox"/> Add
		SILVER SPRINGS, FL 34488	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	HELMUT FORERO	1250 S. PINE ISLAND RD.	<input type="checkbox"/> Add
		PLANTATION, FL 33324	<input checked="" 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

FILED
16 FEB 21 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 FEB 11 PM
STOCK MARKET
TILLYARD'S LTD.

FILED
16 FEB 11 PM 5:09
ST. LOUIS, MO
FEB 11 2011

(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)

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 Feb 3, 2016

Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

KIRSTIE WARD
Typed or printed name of signee

Typed or printed name of signee