

L13000152009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

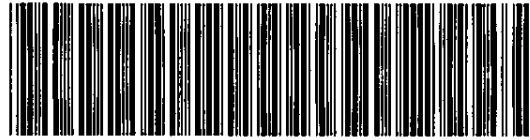
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Amend

Office Use Only



600254581876

12/13/13--01004--010 **25.00

FILED
14 FEB 17 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7.0000 FEB 17 2014

1

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Bada Bing Fishing Team 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:

Salvador Papia

Name of Person

Bada Bing Fishing Team

Firm/Company

4045 Forrestal Ave #8

Address

Orlando, FL 32806

City/State and Zip Code

sampapia@badabingfishingteam.com

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

For further information concerning this matter, please call:

Salvador Papia

Name of Person

407 227-7330

at ()

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 17, 2013

SALVADOR PAPIA
4045 FORRESTAL AVE #8
ORLANDO, FL 32806

SUBJECT: BADA BING FISHING TEAM LLC
Ref. Number: L13000152009

We have received your document for BADA BING FISHING TEAM LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters " MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

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.

Tim Burch
Regulatory Specialist II

Letter Number: 413A00028640

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Bada Bing Fishing Team 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 10/29/13 and assigned
Florida document number L13000152009.

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 end with 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)

FILED
14 FEB 17 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

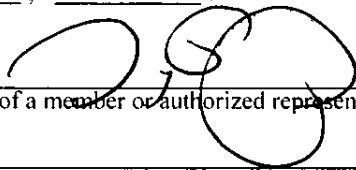
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mr	MGR Salvador Papia	2419 Weber St	<input checked="" type="checkbox"/> Add
		Orlando FL 32803	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED
14 FEB 7 AM 9:22
Add
Remove
Add
Remove
Add
Remove

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

Dated **December 3**, **2013**



Signature of a member or authorized representative of a member

Salvador Papia

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
14 FEB 17 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA