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(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone #	#)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
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SECRETARY OF STATE
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COVER EETTER

Name of Person

3

TO: Registration Section
Division of Corporations

BISHOP BEALE OFFICE, LLC

SUBJECT:

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:

Kelly Hooper

	BishopBeale		
		Firm/Company	
	250 North Orange A	venue, Suite 1500	
	-	Address	
	Orlando, FL 32801		
		City/State and Zip Code	
	kelly@bishopbeale.c	om	
	E-mail address: (to be used for future annual report notif	fication)
For further information	n concerning this matter, please co	all:	
Kelly Hooper		407 426-7702	
Nam	e of Person		e Telephone Number
Enclosed is a check fo	r 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



February 12, 2015

YELLY HOOPER 250 N ORANGE AVE STE 1500 ORLANDO, FL 32801

SUBJECT: BISHOP BEALE OFFICE, LLC

Ref. Number: L13000162358

We have received your document for BISHOP BEALE OFFICE, LLC and your check(s) totaling \$1375.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you are trying to file is not correct. You can not change a manager or member's address on a registered agent change. You will need to file a Amendment for the LLC.

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) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 715A00003033

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BISHOP BEALE OFFICE, LLC		ACC A
(<u>Name of the Limited Liab</u> (A Flor	vility Company as it now appears on our reco	rds.)
The Articles of Organization for this Limited Liability Florida document number <u>L13000162358</u> This amendment is submitted to amend the following:	Company were filed on 11/19/2013	3 Part assign fr. 15
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the words " Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD	D.D.E.C.C.\	LC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reqregistered agent and/or the new registered office ac		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	ress
	,	Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registe	ered 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Beale Commercial Realty 5	250 N. Orange Ave., Suite 1500	■ Add
	Beale Commercial Realty Services, Inc.	Orlando, FL 32801	□ Remove
MGR	Bishop Realty & Developm	250 N. Orange Ave., Suite 1500	■ Add
	Bishop Realty + Development I LCC	Orlando, FL 32801	□ Remove
			□ Add
			☐ Remove
			□ Remove
			☐ Remove
			□ Remove

Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) Dated March 30 Signature of a member or authorized representative of a member William D. Bishop III	it amending any other intormation, en	er change(s) here: (Allach additional sheets, if neces	sary.)
The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) Dated March 30 Signature of a member or authorized representative of a member			
The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) Dated March 30 Signature of a member or authorized representative of a member			
The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) Dated March 30 Signature of a member or authorized representative of a member			.
The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) Dated March 30 , 2015 Signature of a member or authorized representative of a member			
The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) Dated March 30 , 2015 Signature of a member or authorized representative of a member			
Signature of a member or authorized representative of a member	(The effective date must be specific, cannot be prio the date this document is filed by the Florida Dep	to date of receipt or filed date and cannot be more than 90 days aff	n al) ter
Signature of a member or authorized representative of a member	Dated March 30	2015	
·	11/1		
William D. Bishop III	Signature Signature	of a member or authorized representative of a member	
· · · · · · · · · · · · · · · · · · ·	William D. Bishop III		

Page 3 of 3

Filing Fee: \$25.00