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2014 JAN 30 PM 1: 26
SECRETARY OF STATE
OF STATE
SECRETARY OF STATE

K. SALY EXAMINER EEB 4 2014

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJI	ECT:	BJ (Deed LLC	
		Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		<u> </u>	r Brissett	
			Name of Person	
		<u></u>	Firm/Company	
		12314	NW25th Street	
			Address	
		Corals	Springs FL 3	3065
		E-mail andress: (Address Prings FL 3 City/State and Zip Code cod 9546 amail. Code to be used for future annual report notion	Com (ication)
For fur	ther information c	oncerning this matter, please ca	all:	
	Rainier	Brissett	at (570) 972 Area Code Daytime	2-5811
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclos	ed is a check for th	ne following amount:		
12 \$ 2	5.00 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

FILED
2014 JAN 30 PM 1:26
FALLAHASSEE, FLORIDA

ЪJ	TALLAHASSEF, FLORIDA TALLAHASSEF, FLORIDA TALLAHASSEF, FLORIDA TALLAHASSEF, FLORIDA TALLAHASSEF, FLORIDA
(<u>Name of the Limited Lia</u> (A Fig.	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liabilit	by Company were filed on $\frac{1/13/20141}{2000}$ and assigned
This amendment is submitted to amend the following	יינ ס'יני
A. If amending name, enter the new name of the	limited liability company here:
-	"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 AD	DDRESS)
	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX))
B. If amending the registered agent and/or registered agent and/or the new registered office a	egistered office address on our records, enter the name of the new
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.

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name (1	Address	Type of Action
MGR	Painier Brissett	12314 NV25th Street	t Add
		Address 12314 NV25th Street Coral Springs Fl.330	65 Remove
			□ Add
			☐ Remove
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			□ Add
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f amending any of	her information, enter change(s) here: (Attack	h additional sheets, if necessary.)
····		
		
The effective date must	her than the date of filing: e specific, cannot be prior to date of receipt or filed date and stilled by the Florida Department of State)	(optional) d cannot be more than 90 days after
Dated		
	Maried	
	Signature of a member or authorized repre	esentative of a member
	Mainier Briss	e#
	Ruinier Brissa Typed or printed name of	sionee

Page 3 of 3

Filing Fee: \$25.00