

L14000106143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

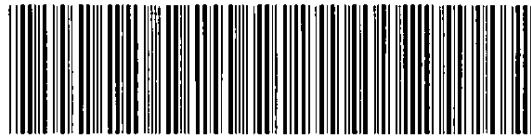
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

Office Use Only

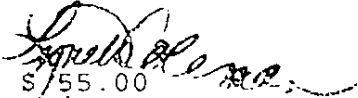


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17 JUN 21 AM 7:50  
MAIL ROOM

2017 JUN 21 PM 1:50  
MAIL ROOM

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 693856 82474A  
AUTHORIZATION :   
COST LIMIT : \$55.00

ORDER DATE : June 21, 2017  
ORDER TIME : 12:13 PM  
ORDER NO. : 693856-005  
CUSTOMER NO: 82474A

DOMESTIC AMENDMENT FILING

NAME: BM ASSETS LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER'S INITIALS: \_\_\_\_\_

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: BM ASSETS LLC

SECOND: The Florida Document Number of the limited liability company is: L14000106143

THIRD: The street address of the limited liability company's principal office is:

2875 NE 191 ST STREET

SUITE 601

AVENTURA, FL 33180

The mailing address of the limited liability company's principal office is:

2875 NE 191 ST STREET

SUITE 601

AVENTURA, FL 33180

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.

a. Granted to: PAUL FELDMAN

b. No authority granted to: \_\_\_\_\_

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

a. Granted to: \_\_\_\_\_

b. No authority granted to: \_\_\_\_\_



JACOB LANDMAN



LIENA LANDMAN

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)