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SEP 24 2014
J. HARRIS

COVER LETTER

TO: Registration Section ' Division of Corporations
SUBJECT: BONN DEVELOPMENT COMPANY, 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:
FRANK P. BUNENBERGER Name of Person
BONN DEVELOYMENT COMPANY, LLC Firm/Company
1275 CLUBHOUSE DR. Address
ROCKLEDGE, FL 32955 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
FRANK BONENBERGER at (321) 631-5037 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

BONN DEVELOPMENT COMPANY, LLC

(A Florida Limited Liability Co	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number 4 14000122900	pany were filed on AUGUST 5, 2014 and	assigned
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	n "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		<u></u>
	SE	<u> </u>
Enter new mailing address, if applicable:	2	= = -
(Mailing address MAY BE A POST OFFICE BOX)	- P	
		T. V.
		ii z
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ne of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

<u>Title</u>	Name	Address	Type of Action
AMBR	GREGORY STAUF	12 DELAWARE LANE	 Add
		12 DELAWARE LANE BRANCHBURG, NJ 08876	□ Remove
			L Add
			□ Remove
			S SECONO
			PARTIES PARTIES 22 PH
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			☐ Remove
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			Remove
			Add
			□ Remove

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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 of the date this document is filed by the Florida Department of State)	(optional) rannot be more than 90 days after
Dated SEPTEMBER 19, 2014.	
Heart Phym	
Dated SEPTEMBER 19, 2014. Signature of a member or authorized representation of the september of the septem	ntative of a member

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Filing Fee: \$25.00

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