

L14000 161806

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

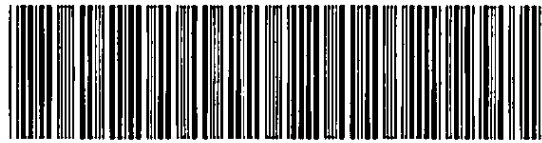
(Business Entity Name)

(Document Number)

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JAN 06 2020

*Amor*

SECRETARY OF STATE  
FILED

2020 JAN -3 PM 1:59

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 3, 2019

CRAIG TURNER  
BAYVIEW CAPITAL HOLDINGS LLC  
190 VINTAGE CIRCLE UNIT 202  
NAPLES, FL 34119

SUBJECT: BAYVIEW CAPITAL HOLDINGS, LLC  
Ref. Number: L14000161806

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a AMENDMENT OF A LIMITED PARTNERSHIP, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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.

Susan Tallent  
Regulatory Specialist II

Letter Number: 719A00024398

*Please see attached.  
Thank you!  
Deborah Labadie*  
2020 JAN -3 PM 11:59

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BAYVIEW CAPITAL HOLDINGS 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:

Craig Turner  
Name of Person

Bayview CAPITAL HOLDINGS LLC  
Firm/Company

109 Vintage Court, Unit 202  
Address

Naples, FL 34119  
City/State and Zip Code

c.turner@bayviewnaples.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DEBORAH A LAPIERRE at (239) 877-7214  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount: \$52.50 previously submitted; see ltr.

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|--|--|--|

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

BATVIEW CAPITAL HOLDINGS LLC

(Name of the Limited Liability Company as it now appears in our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on OCT. 16, 2014 and assigned Florida document number L14000161806.

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 contain 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)**

c/o Craig Turner  
190 Vintage Circle, Unit 202  
Naples, FL 34119

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

c/o Craig Turner  
190 Vintage Circle, Unit 202  
Naples, FL 34119

**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:

216 14th St SE

Enter Florida street address

Naples

City

Florida

Zip Code

34117

**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**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 11/3/20

Elvira A. LaPerra MGR, AMBR, Reg. Agent  
Signature of a member or authorized representative of a member

DeBORAH A. LAPIERRE  
Typed or printed name of signee