L14 000167651

(Re	questor's Name)	
(110	iquosioi o mamo,	
(Ad	dress)	
V	,	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		ļ
		İ
I		ì
		l

Office Use Only



400357493124

01/11/21--01013--010 **25.00

2021 JAN 11 PH 3: 44

2/16/2)

COVER LETTER

	gistration Se vision of Cor			
CHETECT	Bay Proper	ty MB LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing	
		ondence concerning this matter	-	
		Michael Herrman		
			Name of Person	
		Bay Property MB LLC		
			Firm/Company	
		2386 Prairie Dunes		
			Address	
		Clermont, FL 34711		
		 	City/State and Zip Code	
		herrman4@gmail.com	· 	
Day Garden	:		to be used for future annual report no	tification)
		oncerning this matter, please co	att:	
Michael He	errman ————		352 978-9555 at () Payting Dayting	
	Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed is	a check for th	ne 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)
Re	ailing Addres	Section	Street Address: Registration S	
	ivision of C O. Box 632	Corporations 27	Division of Co The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bay Property MB LLC		
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Co	mpany were filed on 10/28/201	and assigned
Florida document number L14000167651	<u>-</u> -'	·
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
he new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
<u>Principal office address MUST BE A STREET ADDRI</u>	ESS)	
		021
		-n
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		, M
		, 3 , 0
		
3. If amending the registered agent and/or registered gent and/or the new registered office address here:	office address on our records,	enter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida stree	l 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Clifford Herrman		
		2386 Prairie Dunes, Clermont FL 34711	≅Remove
			☐ Change
			□Add
			□Remove
			□Change
			Add Remove
			— □ Change ∴ ∴ ∴ ∴ ∴ ∴ ∴ ∴ ∴ ∴ ∴ ∴
			 □Add
			□Remove
			□Change
			□Add
			Remove
			Change
			□Add
			□Remove

		
		,
		2021
	-·····································	<u>— </u> т
		PH D
		PH 3: 14
		
 		
Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this bloocument's effective date on the Defective date.	t be specific and cannot be prior to date of filing or mor ock does not meet the applicable statutory filing	(optional) re than 90 days after filing.) Pursuant to 605.0207 (requirements, this date will not be listed as t
record specifies a delayed effectiv	e date, but not an effective time, at 12:01 a.m. or	n the earlier of: (b) The 90th day after the
d is filed.		
December 20	2020	
d is filed. December 20	Signature of a momber or alphorned representative o	d'a member

Filing Fee: \$25.00