## L15000009887

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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## COVER LETTER •

Division of Co			
BMH Hold	lings Group, LLC		
SUBJECT.	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Derek Hovey		
		Name of Person	
	BMH Holdings Group, LL	.C	
		Firm/Company	
	2699 Lee Road, Suite 120		
		Address	
	Winter Park, FL 32789		
		City/State and Zip Code	
	Derek@StoneBridgeInvesti	•	
	E-mail address: (	to be used for future annual report noti	fication)
For further information	concerning this matter, please c	all:	
Derek Hovey		407 704-9959	
Name	of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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)

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**

BMH Holdings Group, LLC		
(Name of the Limited Liability Compa (A Florida Limited	i <b>ny as it now appears on our r</b> Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L15000009887</u> .	were filed on January 16, 2	2015 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2699 Lee Road	
Principal office address MUST BE A STREET ADDRESS)	Suite 120	TAS 1
	Winter Park, FL 32789	C C
Enter new mailing address, if applicable:	2699 Lee Road	JARY
(Mailing address MAY BE A POST OFFICE BOX)	Suite 120	
-	Winter Park, FL 32789	S TA
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		cords, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street d	ıddress
	City	_, Florida Zip Code

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 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>	<u>Address</u>	Type of Action
MGR	Jennifer Hovey	2699 Lee Road	<b>⊟</b> Add
		Suite 120	Remove
		Winter Park, FL 32789	☐ Change
			Add
			□ Remove
		*	
			Add
			□ Remove
			Change
<del></del>			□ Add
			☐ Remove
		<u></u>	Change
	<del></del>		□ Add
			Remove
			SECRETARY OF STATE ALLA MASSEE, FLORIDA
			Om —

	g manager Derek Hovey	to: 2699 Lee Road, Suite	120, Winter Park, FL	32789
Add FEI/EIN: 47-284357	)			
		<u> </u>	311	<u>.</u>
			· <del></del>	
	T.1.	2015	·	
ective date, if other than a effective date is listed, the date te: If the date inserted in thi	must be specific und cumilot t	e prior to date or ming or m	(optional nore than 90 days after filing g requirements, this da	ng.) Pursuant to 605.0
cument's effective date on th			•	
record specifies a dela he 90th day after the i		ut not an effective t	ime, at 12:01 a.m	n. on the earlie
	2015	·		
ed	7. \			15 TAL
led July 9			_	، ا رات سور
ted July 9	Signature of a member of	or authorized representative	of a member	JUL 15 CHETAR

Filing Fee: \$25.00