

L150000 59152

(Requestor's Name)

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(City/State/Zip/Phone #)

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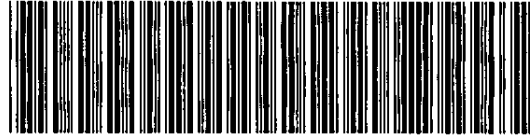
(Business Entity Name)

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FILED
15 MAY 15 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 21 2015

J SHIVERS

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www.Florida-Recht.com

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May 14, 2015

VIA FedEx

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: Black Rouse LLC
Statement of Authority and Articles of Amendment**

To whom it may concern:

Enclosed are Articles of Amendment, a Statement of Authority with copy to be certified, a check payable to the Florida Department of State for applicable fees, and a self-addressed stamped envelope for return of certified copy. Please submit the Articles of Amendment and Statement of Authority for filing as soon as possible.

As mentioned above, please use the included self-addressed stamped envelope to mail the certified copy of the Statement of Authority (copy enclosed). If you have any questions or concerns, please do not hesitate to contact the undersigned.

Very truly yours,



CHRISTOPHER J. KLEIN
Baur & Klein, P.A.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Black Rouse 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:

Christopher J. Klein

Name of Person

Black Rouse LLC

Firm/Company

100 N. Biscayne Blvd. # 2100

Address

Miami, FL 33132

City/State and Zip Code

cklein@worldwidelaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher J. Klein

305 377-3561
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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**

Black Rouse, LLC

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

The Articles of Organization for this Limited Liability Company were filed on April 3, 2015 and assigned
Florida document number L15000059152

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Enter Florida street 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 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>	<u>Type of Action</u>
MGR	Christopher J. Klein	100 N. Biscayne Blvd.	<input checked="" type="checkbox"/> Add
		#2100	<input type="checkbox"/> Remove
		Miami, FL 33132	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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15 MAY 15
SECRET
INFORMATION

SECRETARY OF DEFENSE
15 MAY 15 AM 10:00
Pursuant to 605.0207
it will not be listed as

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated May 13, 2015

Christopher J. Klein

Page 3 of 3

Filing Fee: \$25.00