# 615000123842

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### **COVER LETTER**

	gistration Se vision of Cor				
SUBJECT:		D HALL LLC			
SUBJECT		Name of Lim	ited Liability Company	;	·
The enclosed	f Articles of	Amendment and fee(s) are sub	mitted for filing.		
		ndence concerning this matter	_		
		Filippo Cinotti			
			Name of Person	1	
		Cinotti Galgano			
			Firm/Company		
		66 W Flagler St., Suite 100	12		
		Address			
		Miami, FL 33130			
			City/State and Zip C	lo <b>de</b>	
		admin@cinottilaw.com  E-mail address: (	to be used for future an	nual report notifi	cation)
For further in	nformation co	oncerning this matter, please ca	all:		
Filippo Cino	otti		786	577-2291	
	Name of	f Person	at ( Area Code	Daytime	Telephone Number
Enclosed is a □ \$25.00 F		ne following amount:  \$\Begin{align*} \Begin{align*} align*	S55.00 Filing Certified Cop		<ul><li>\$60.00 Filing Fee,</li><li>Certificate of Status</li></ul>
			(additional copy	•	Certified Copy (additional copy is enclo
<u>Mai</u> Rec	iling Address gistration S	s: Section	Stree Ran	et Address: istration Sect	ion
		orporations	Div	istration Secti ision of Corp	orations
	D. Box 632			Centre of Ta	

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	O	F	
BCC FOOD HALL LLC			PRI JUL 22
	ited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Jability Company)	22
			2015年 1111
The Articles of Organization for this Limited I	Liability Company	were filed on July 20, 2015	Transplant assigned U
Florida document number L15000123842	·		デージ <u>.</u> 電気流 <b>切</b>
This amendment is submitted to amend the following	llowing:		
A. If amending name, enter the new name	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	wards "Limited Light	ity Company " the designation "LLC"	or the abbreviation "L.L.C."
-		ny company, the designation blue of	in the address factor 15.15.C.
Enter new principal offices address, if appli			
(Principal office address MUST BE A STRE	ET ADDRESS)		
			<del></del>
Enter new mailing address, if applicable:		Cinotti Galgano	
(Mailing address MAY BE A POST OFFICE	E BOX)	66 W Flagler St., Suite 1002	
	<del> </del>	Miami, FL 33130	
B. If amending the registered agent and/or agent and/or the new registered office addresses		ddress on our records, <u>enter th</u>	ie name of the new registered
agent and/or the new registered office addr-	ess nere.		
Name of New Registered Agent:	Cinotti Galgano	1	
New Registered Office Address:	66 W Flagler St	, Suite 1002	
		Enter Florida street address	
	Miami	, Flor	ida <u>33130</u>
		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>	Address	Type of Action
			□Add
			□Remove
			□ Change
			□Add
			Change
		□Add	
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			□ Change
			□Add
		□Remove	
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			□Add
			□Remove
			□ Chango

## Page 2 of 3

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ffective	e date, if other than the date of filing:
	ive 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 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
ocumen	t's effective date on the Department of State's records.
. 50.50	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
	Oth day after the record is filed.
	Sula 71 2070
ated _	Sun 71 2070
	///
	Signature of a number or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00