L15000147318

(Re	equestor's Name)	····
(Ad	dress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
·		

Office Use Only



500277028495

09/28/15--01015--010 **25.00

2615 SEP 28 P 1: 02

SEP 2 9 2015

S MASON



Alexandre M. Mestdagh, Esq. Steve Wall, Esq. Andrew Hall, Esq. *David B. Falstad, Esq. *Of Counsel

September 24, 2015

Florida Department of State – Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

BCF/UCF PROPERTIES, LLC

Amendment to change Registered Agent and change address of MGR Joseph J McGurrin

Dear Sir/Madam:

Please find the enclosed check (Check No. 3451), made payable to Florida Department of State, for \$25.00 to process the Amendment to change the Registered Agent of the above-mentioned company, as well as change the address of Manager Joseph J McGurrin. Additionally, please find the cover letter and written Amendment, which provides the details of said changes.

Should you have any questions/concerns, please do not hesitate to contact me via email Zoe@m-wlawfirm.com, or by phone at (407) 702-6702.

Warmest Regards.

Zoe Bevers Paralegal

Encl.

TO: R	egistration Sec ivision of Cor	ction porations				
SUBJECT	BCF/UCF F	PROPERTIES, LLË				•
SODGECA	·	Name of Limited	List	ility Company		
The enclos	ed Articles of	Amendment and fee(s) are submit	ted f	or filing.		
Please retu	rn all correspor	ndence concerning this matter to	he fo	offowing:		
		JOSEPH J MCGURIUN		: 1	,	
			N	ame of Person		
			F	Irni/Company	: :	
		8789 SAN JOSE BOULEVA	кр,	SUITE 305		
		JACKSONVILLE, FL 32217		Address	:	
		JOE@CME.EDU		rate and Zip Code		
		E-mail address: (to b	e lisco	d for future annual report	notification)	
For further	information co	ncerning this matter, please call:		<i>:</i>		
JOSEPH J	MCGURRIN .			11(904) 99°	3-49	80
	Name of	Person		Area Code Day	rtiine Teleph	one Number
Enclosed is	a check for the	following amount:			:	
᠍ \$25.00↑	Filing Fee	Certificate of Status	'C	5.00 Fiting Fee & lertified Copy dditional copy is enclosed)	; E	1 \$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

			:		. ` ; ' '	5	-
BCF/UCF PROPERTIES, LLC			1,		1.	SEP	en inchient
(Name of the Limi	ted Liability (A'Elorida	Company as it n Limited Liability C	ow appears on our	r records.)		8	
	,	1;			الم. الم	σ	
The Articles of Organization for this Limited L	iability Co	mpany were fil	ed on 8/27/2015	·	[(A)	and as	signed
Florida document number L15000147318					RID,	. 0	
This amendment is submitted to amend the following	owing:				,L24	1°0	
A. If amending name, enter the new name of	f the limit	ed liability con	apany here:				
			٠				
The new name must be distinguishable and contain the v	vords "Limir	ed Liability Comp	any," the designatio	on "LLC" or	the abbrev	iation "l.	.L.C."
Enter new principal offices address, if applic	able:	•					
(Principal office address MUST BE A STREE	J	(223	:				
		! .					
					•	~~~	
Forton war walling a bloom is a collection		;					
Enter new mailing address, if applicable:	1.010		Mark State and Company of the Samuel of the Samuel of Sa		· · · · · · · · · · · · · · · · · · ·		
(Mailing address MAY BE A POST OFFICE	BOX)		·				
		·					
B. If amending the registered agent and		and office ask	luggo ou our e	naanda ar	stan tha	nome	of the nor
registered agent and/or the new registered of			ness on jour 1	cemua, <u>ci</u>	ner inc	ииппс	or the her
		;	•				
Name of New Registered Agent:	JOSEPH	I J MCGURRIŅ					
	8789 S A	N IOSE BOUL	EVARD, SUITE	305:			
New Registered Office Address:		·! <u>:</u>	Enter Florida street				
	TACKS	ONVILLE			32217		
	UACKS	City		, Eļorida		in Code	
New Registered Agent's Signature, if changing F	legistered /	Agent:				•	
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the r company has been notified in writing of this d	er and om stered age registered change	nplete perform nt as provided	ance of my duti for in Chapter I hereby confi	ies, and I c 605, F.S.	um fami Or, if it e limited	liar wil iis docu Hiabili	h and unent is ity

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 Type of Action <u>Title</u> Nume <u>Address</u> JOSEPH J MCGURRIN 8789 SAN JOSE BOULEVÁRD MGR □ Add SUITE 305 □ Remove JACKSONVILLE, FL 32217 ■ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change D Add □ Remove Change 28 ☐ Remove ☐ Change

				-			
and a		:		Ĭ.			
If amending any other information,	antau ahanesi	(0) 1.0.00	Estimals o	! whiteional :	: lante if ward	econs)	
ir amending any other mormation,	enter change	(s) here:	(Autien a	KKAHOHAI S	hieers, y nece	ssary.)	
					:		
		;		<u> </u>	<u> </u>		
	·	<u> </u>	: 		3		
		1	,			•	
	,	1		······································			-
***************************************		,				·····	
		-	<u> </u>				
			-, 	!			
			,	.			
110000000000000000000000000000000000000							
		_		<u> </u>			
		<u> </u>		 	· · · · · · · · · · · · · · · · · · ·		
				į			
		:	į				
				!			
		- 	<u> </u>		,		
44	<u> </u>			: :			
	<u> </u>	<u> </u>					
				1			
ffective date, if other than the date o	f filing:	<u> </u>	<u> </u>	·	(option	ıal)	
an effective date is listed, the date must be specificate. If the date inscried in this block does	is not meet the	applicabl	date of filing le statutory	or more that filing requ	n 90 days after fi irements, this c	ling.) Persua late will not	n to 605,0207 be listed as
ocument's effective date on the Departme	ent of State's re	cords.	į	1			
e record specifies a delayed effec	tive date b	ut not a	n effecti	i emit av	ah 12 ≀01 a	m on the	earlier of
The 90th day after the record is	filed.	inot t	ar en eçci	ve time,	at 12,01 ft,	m, on me	earner or.
Sentembor 22	201	5		!			
September 23		:	. ,	~			
(Annil	1.		hun.	(R)		* 4	
- Mgnatu	pe of a member o	r authnriz	ed represent	ntive of a me	enther		
JOSEP	и тисст					2015	
JO2E4		r printed n	ame of sign			<u>-</u> ਲੂੰ	- 1
		r d	•	:	• • •	153	kom is frank Luckeringe ()
	;	Page 3	of 3	-		(
	. [\$25.00		ر در این از این از این از این ا	1 TO	O
	F.1111	.6 · · · ·	<i>Ψω.υ.</i> υυ	ļ	33.	7	