LIU00001334

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Division of Cor		
CHID IP OT.	Estate Services	
SUBJECT:		nited Liability Company
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing
		-
riease return an correspo	indence concerning this matter	to the following:
	Weslee Alicea	
		Name of Person
	Pier 1 Real Estate Service	s
		Firm/Company
	7821 Carriage Pointe Sr	
		Address
	Gibsonton Fl 33534	
		City/State and Zip Code
	bmmbinvestments @gmail	.com (to be used for future annual report notification)
For further information of	oncerning this matter, please c	
Weslee Alicea	matter, prease o	813 5694556
Name of Person		at () Area Code Daytime Telephone Number
Nume of	11 013011	Area Code Baytime Telephone Number
Enclosed is a check for th	e following amount:	
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing, Fee ☐ Certified Copy Certificate of Staffs &
		(additional copy is enclosed) Certified Copy (additional copy is enclosed)
		76 m
Registra	ING ADDRESS: ation Section	STREET/COURIER ADDRESS:
Division P.O. Bo	n of Corporations	Division of Corporations Clifton Building
	ssee FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Pier 1 Real Estate Services				
(Name of the Lim	ited Liability Company as (A Florida Limited Liabili	it now appears on our records. y Company)	.)	
The Articles of Organization for this Limited I	Liability Company were	filed on January 04, 2016		and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability o	company here:		
The new name must be distinguishable and contain the	words "Limited Liability Co	mpany," the designation "LLC"	or the abbrev	iation "L.L.C."
Enter new principal offices address, if appli-	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:	_		- 	
(Mailing address MAY BE A POST OFFICE	<u></u>			
B. If amending the registered agent and registered agent and/or the new registered o		address on our records,	enter the	
Name of New Registered Agent:	Joseph Jackson		<u> </u>	I P I A MARIE SAME
New Registered Office Address:	7821 Carriage Pointe	Dr Enter Florida street address		
	Gibsonton	. Flor	ridā 33534	<u>.</u>
		ity		in 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
AMBR	Byron Metz	7821 Carriage Pointe Dr Gibsonton	□ Add
			■ Remove
			Change
AMBR	Weslee Alicea	7821 Carriage Pointe Dr Gibsonton	Add
			□ Remove
			Change
			□ Add
			☐ Remove
			Change
			Remove Change
			Add Remove
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Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be p	ariar ta data a	f filing or more	opt	ional) m filing \ \	Durcuont	to 605 026
Note: If the date inserted in this block does not meet the ap	plicable sta	tutory filing re	quirements, th	is date w	ill not b	e listed a
document's effective date on the Department of State's reco	ords.					
ne record specifies a delayed effective date, but	not an e	ffective time	e, at 12:01	a.m. o	n the e	earlier d
The 90th day after the record is filed.						
Dated,,		A				
	1	<i>J</i>) <i>J</i> .				
I . 2	_	XIII				
W.	Mal	MWKA	, ,			
Signature of a member or a	authorized re	presentative of a	member			_

Page 3 of 3

Filing Fee: \$25.00