# L1600035129

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bı	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	J. HORNE AUG 10 2022

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	P	ICK UP:	8/9 DANNY		
XX	CERTIFIED COPY  PHOTOCOPY				
	CUS				<del>-</del>
XX	FILING	LLC	AMEND		
1.	BIP HOMEWOOD, I	LLC CUMENT #)			<del>-</del>
2.	(CORPORATE NAME AND DO	OCUMENT #)	······································	<del></del> .	
3.	(CORPORATE NAME AND DO	CUMENT #)			
4.	(CORPORATE NAME AND DO	CUMENT #)			
5.	(CORPORATE NAME AND DO	CUMENT #)			
6.	(CORPORATE NAME AND DO	CUMENT #)			
SPECIA INSTRU	AL UCTIONS:				
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### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2022 AUG-9 AMII: 28

BIP HOMEWOOD, 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 I Florida document number L16000035729		were filed on February	y 22, 2016	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liab	oility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designa	ation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applicable:		101 Central Avenue		
(Principal office address MUST BE A STREET ADDRESS)		St. Petersburg, FL 33	701	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		C/O Sabal Trust  101 Central Avenue  St. Petersburg, FL 33	701	
B. If amending the registered agent and/or agent and/or the new registered office addresses.	registered office a	address on our record	ds, <u>enter the name</u>	of the new registered
Name of New Registered Agent:	Bryant N. Jones	S		. <u>.</u>
New Registered Office Address:	101 Central Av	renue		
-		Enter Florida str	reet address	- <del></del>
	St. Petersburg		, Florida 337	01
		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
MGR	Bryant N. Jones	C/O Sabal Trust	<b>=</b> Add
		101 Central Avenue	□Remove
		St. Petersburg, FL 33701	□Change
PVPST	Bryant N. Jones	C/O Sabal Trust	٠
		101 Central Avenue	_
		St. Petersburg, FL 33701	□ Change
MGR	John F. Ralph, Jr.	6850 Central Avenue	□Add
		St. Petersburg, FL 33707	≣Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Remove

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ffective date, if other than the an effective date is listed, the date made in this locument's effective date on the	ust be specific and cannot be block does not meet the a	applicable statutory fil	(option more than 90 days after fil ing requirements, this d	ing.) Pursuant to 605.020
record specifies a delayed effect is filed.	ive date, but not an effec-	tive time, at 12:01 a.m	n. on the earlier of: (b)	The 90th day after the
ated August 4,	. 2022	·		
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Filing Fee: \$25.00