## U60062183

(Red	questor's Name)	
(Add	dress)	·-···
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(City	y/State/Zip/Phone	o #)
(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	MAIL	
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(Do	cument Number)	
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Special Instructions to	Filing Officer:	
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S. YOUNG

SECRETARY OF STATE A

## **COVER LETTER**

	Division of Co				
SUBJEC'		STMENTS, LLC			
SOBJEC	1	Name of Limit	ed Liability Company	<del></del>	
The enclo	sed Articles of	f Amendment and fee(s) are subn	nitted for filing.		
		ondence concerning this matter to			
		MAXWELL BIKOFF			
			Name of Person	<del></del>	
		BG INVESTMENTS, LLC			
			Firm/Company	<del></del>	
	5875 COLLINS AV APT#905				
			Address		
		MIAMI BEACH 33140		16 NOV -7 PH 4: 22	
			City/State and Zip Code	P	
		mbikoff@gmail.com	o be used for future annual report notifi	ection) F.	
For furthe	er information	concerning this matter, please ca	·	22	
Maxwell			917 439-2489		
,	Name	of Person	at () Area Code Daytime	Telephone Number	
Enclosed	is a check for	the following amount:			
\$25.0	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)	
	1	LING ADDRESS:	STREET/COURIE Registration Section		
	Divis P.O.	stration Section sion of Corporations Box 6327 hassee, FL 32314	Division of Corpora Clifton Building 2661 Executive Cer	itions iter Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BG INVESTMENTS, LLC				
(Name of the Limited	Liability Compa Florida Limited I	ny as it now appears on o Liability Company)	ur records.)	
The Articles of Organization for this Limited Lial	bility Company	were filed on 03/29/20	016	and assigned
Florida document number L16000062783	·			
This amendment is submitted to amend the follow	ving:			
A. If amending name, <u>enter the new name of t</u>	he limited liab	ility company here:		
The new name must be distinguishable and contain the wor	rds "Limited Liabil	lity Company," the designa	ation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applical	ble:	5875 COLLINS AV		i PE
(Principal office address MUST BE A STREET	'ADDRESS)	APT#905		香 空間
		MIAMI BEACH, FL	33140	- 1000
Enter new mailing address, if applicable:		5875 COLLINS AV		P Fig
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	APT#905		-
		MIAMI BEACH, FL	33140	<b>~</b>
B. If amending the registered agent and/or registered agent and/or the new registered offi			records, enter th	e name of the ne
New Registered Office Address:	5875 COLLINS	S AV #905		
		Enter Florida sti	reet address	
	MIAMI BEAC		, Florida _ <sup>3314</sup>	
		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>	Type of Action
MGR	MAXWELL BIKOFF		Add
			□ Remove
		5875 COLLINS AV#905 MIAMI I	☐ Change
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			Remove
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fan effective date Note: If the date	if other than the distribution is listed, the date must be inserted in this blocative date on the Dep	e specific and a k does not ma	cannot be prior eet the applic	able statutory	or more than 9	(option: 0 days after fill ments, this da	ing.) Pursuant to	605.020 listed as
rocument 2 ener	tive date on the Dep	nument of St	ate s records.					
	cifies a delayed on the correction of the correc		ate, but no	t an eff <b>e</b> cti	ve time, at	12:01 a.n	n. on the ea	arlier o
Dated	11/1	,	2016					
		$\triangle a$	1/5					
		gnature of his	ember or autho	orized represent	ative of a mem	her		-

Page 3 of 3

Filing Fee: \$25.00