

L16000075996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

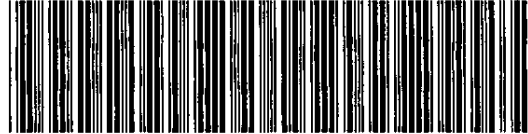
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



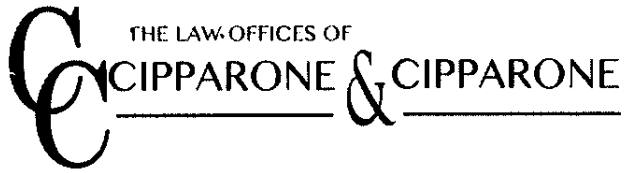
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2016 JUL 21 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

JUL 22 2015
BRUCI



July 18, 2016

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

Re: Amendment to Articles of Organization - Bomfim Properties LLC

Dear Filing Clerk,

Please find enclosed the Articles of Amendment to Articles of Organization for the above referenced entity. Also enclosed is our firm's check no. 2213 in the amount of \$25.00 to cover the filing fee for same. Please mail the acknowledgement to: Jennifer Dutcher, Cipparone & Cipparone, P.A., 1525 International Parkway, Suite 1071, Heathrow, FL 32746.

Thank you for your assistance in this matter. Should you have any questions or concerns, please feel free to contact me directly at 321.275-5914.

Regards,

Jennifer Dutcher
Real Estate Paralegal

FILED
2016 JUL 21 A 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

/jhd
Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Bomfim Properties LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ryan Cipparone, Esquire

Name of Person

Cipparone & Cipparone, P.A.

Firm/Company

1525 International Parkway, Suite 1071

Address

Lake Mary, Florida 32746

City/State and Zip Code

RCipparone@CipparonePA.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ryan Cipparone

321 275-5914
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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)

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

2016 JUL 21 A 10:59
SECRETARY OF STATE
TALLAHASSEE, FL 32301

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Bomfim Properties 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 Liability Company were filed on April 18, 2016 and assigned
Florida document number L16000075996.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida

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>	<u>Type of Action</u>
MGR	Saulo Bomfim	128 Verde Way	<input type="checkbox"/> Add
		Debary, Florida 32713	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

FILED
2018 JUL 28
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
A 8:54

2015 JUL 21 A 10:54
SECURITY OF STATE
TALLAHASSEE, FLORIDA

FILED
2016 JUL 21 AM 10:54
CLERK OF THE STATE
TALLAHASSEE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated July 18, 2016

Signature of a member

Signature of a member or authorized representative of a member

Licia Bomfim, Manager

Typed or printed name of signee