L16000088751

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Danisant Number)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 27, 2016

PATRICIA PAPPATERRA 1566 NE 104 ST MIAMI SHORES, FL 33138

SUBJECT: BEE COLONY CREW LLC

Ref. Number: L16000088751

RECEIVED SECRETARY OF SINTE TALLAHASSEE, FLORIDA

We have received your document for BEE COLONY CREW LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page 3 not enclosed in amendment documents. needs to to be enclosed with signature.

We have received your document for BEE COLONY CREW LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BEE COLONY CREW LLC					
(<u>Name of the Limi</u>	ted Liability Compan (A Florida Limited Li	y as it now appears on o ability Company)	ur records.)		
The Articles of Organization for this Limited L	iability Company v	vere filed on 05/05/20	16	and assign	ed
Florida document number L16000088751	·				
This amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name of	f the limited liabil	ity company here:			
The new name must be distinguishable and contain the v	vords "Limited Liabilit	y Company," the designa	tion "LLC" or the	abbreviation "L.L.C	72
Enter new principal offices address, if applic	able:		······································	<u> </u>	
(Principal office address MUST BE A STREE	ET ADDRESS)			6 NOV	
				第上 [=- n
Enter new mailing address, if applicable:			PH PH	<u></u>	
(Mailing address MAY BE A POST OFFICE BOX)				#: 87 F: 87	
				<u> </u>	
B. If amending the registered agent and registered agent and/or the new registered o	•		records, enter	r the name of	the new
Name of New Registered Agent:	Patricia	Pappaker 104th St	29		
New Registered Office Address:	1566 NE	104 th St Enter Florida str	eet address		
	Miami &	Shores	, Florida _	33138	
		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
AMBR	PATRICIA PAPPATERRA	1566 NE 104 ST	= Add
		MIAMI SHORES, FL 33138	☐ Remove
			☐ Change
			□ Add
			□ Remove
			Change
		Add	
			Remove Remove Change
-thg.,	1		Remove Remove Remove Remove Remove Remove Remove
			Change
			☐ Remove
			Change
			Add
			□ Remove
			Change

If amending any other information, enter change(s) here: (Attach additional sheets, a	
·	,
	DIVISION OF
	(C)
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	. 37
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	(optional) s after filing.) Pursuant to 605.0207 (3 ts, this date will not be listed as the
the record specifies a delayed effective date, but not an effective time, at 12: The 90th day after the record is filed.	:01 a.m. on the earlier of:
Dated 07/29/2016	
Signature of a member or authorized representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00