

L16000132323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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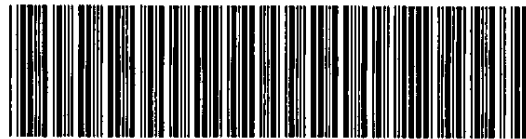
(Business Entity Name)

(Document Number)

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2016 OCT -5 PM 3:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY

OCT -7 2016

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** BH Island Holdings, 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:

Natasha Friedenber

\_\_\_\_\_  
Name of Person

BH Island Holdings, LLC

\_\_\_\_\_  
Firm/Company

555 NE 185 St., Ste. 201

\_\_\_\_\_  
Address

Miami, FL 33179

\_\_\_\_\_  
City/State and Zip Code

natasha.friedenberg@dfass.com

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

For further information concerning this matter, please call:

Natasha Friedenber

305 654-9200 ext. 1156  
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

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

BH Island Holdings, LLC

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

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2016 OCT -5 PM 3:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 07/18/2016 and assigned  
Florida document number L16000132323

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:

555 NE 185 St., Ste. 201

**(Principal office address MUST BE A STREET ADDRESS)**

Miami, FL 33179

Enter new mailing address, if applicable:

P.O. Box 380758

**(Mailing address MAY BE A POST OFFICE BOX)**

Miami, FL 33238-0758

**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:

Mitrani, Isaac Esq.

New Registered Office Address:

301 Arthur Godfrey Road, Penthouse

Enter Florida street address

Miami Beach

City

Florida 33140

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**

**MGR = Manager**  
**AMBR = Authorized Member**

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Add  
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TALLAHASSEE, FLORIDA

2016 OCT -5 PM 3:40  
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TALLAHASSEE, FL 32301

FILED  
2016 OCT -5 PM 3:45  
U.S. DISTRICT COURT  
SOUTHEASTERN DISTRICT  
ATLANTA, GEORGIA

**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.

Dated September 21, 2016

x Juliette Keyser  
Signature of a member of

Signature of a member or authorized representative of a member

Juliette Klepach

Typed or printed name of signee