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## **COVER LETTER**

TO:	Registration So Division of Co	ection rporations		i			
SUBJE		TOGRAPHY, LLC		•			
00202		Name of Lin	nited Liability Company				
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please n	eturn all correspo	ondence concerning this matter	to the following:				
		Magdalena Prieto, CPA					
			Name of Person				
			Firm/Company				
		7422 Brunswick Circle					
			Address				
		Boynton Beach, FL 334	72				
	City/State and Zip Code						
		mprietobusiness@gmail.	com to be used for future annual report noti				
For furth	er information c	oncerning this matter, please o	•	ncanon)			
Magdal	ena Prieto		561 523-2061				
	Name o	f Person	Area Code Daytim	e Telephone Number			
Enclosec	l is a check for th	ne following amount:					
<b>■ \$2</b> 5.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & 4 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 Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



March 19, 2020

MAGDALENA PRIETA, CPA 7422 BRUNSWICK CIRCLE BOYNTON BEACH, FL 33472

SUBJECT: BDC PHOTOGRAPHY, LLC

Ref. Number: L16000171435

We have received your document for BDC PHOTOGRAPHY, 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 220A00006035

Irene Albritton Regulatory Specialist II

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BDC PHOTOGRAPHY, LLC

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

TO STATE OF THE ST

The Articles of Organization for this Limited L	iability Company	were filed on 09/7/2016	and assigned
Florida document number L16000171435	·		*:
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	mendment is submitted to amend the following:  mending name, enter the new name of the limited liability company here:  EAL ESTATE ENTERPRISES, LLC  name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" o		
BDC REAL ESTATE ENTERPRISES, LLC			
The new name must be distinguishable and contain the v	ords "Limited Liabi	ility Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	N/A	
(Principal office address MUST BE A STREE	T ADDRESS)		
Finter new mailing address, if annlicables			
•	Die:		
Mailing dadress MAT BE A POST OFFICE	<u>BUX)</u>		· · · · · · · · · · · · · · · · · · ·
		address on our records, <u>enter</u>	the name of the new registere
agent and/or the new registered office addres	ss here:		
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida street addres	ZZ,
		, FI	orida
		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.

or removed	g Authorized Person(s) authorized to n from our records:	•			
MGR = Manager AMBR = Authorized Member					
<u> Fitle</u>	Name	- Address	Type of Action		
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ctive date, if other than the da effective date is listed, the date must b	ate of filing: (optional) se specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0
e: If the date inserted in this bloc	k does not meet the applicable statutory filing requirements, this date will not be lister
ument's effective date on the Department	artment of State's records.
	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
s filed.	
FEBRUARY 22	2020
zd	
51	gnature of a member or authorized representative of a member
ERIC PACHECO, PRESI	DENT
	Typed or printed name of stenee

Filing Fee: \$25.00