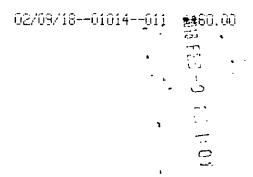
## 116000231519

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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FEB 1 2 2019 J. HARRIS

## **COVER LETTER**

TO:				
enio in				
SOBJE			ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	endence concerning this matter	to the following:	
		Jeffrey Benson		
			Name of Person	
Division of Corporations  Basyside Realty, 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:    Jeffrey Benson				
	Basyside Realty, LLC    Name of Limited Liability Company			
		3728 Bellewater Blvd.		
			Address	
		Riverview, FL. 33578		
		<del></del> .	City/State and Zip Code	···········
		E-mail address: (	to be used for future annual report notif	ication)
For fur	ther information co	oncerning this matter, please ca	afl:	
Jeffrey	Benson		727 515-2694	
	Name o	f Person	Area Code Daytimo	: Telephone Number
Enclose	ed is a check for th	ne following amount:		
□ \$25	5.00 Filing Fee	•	Certified Copy	Certificate of Status & Certified Copy

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

Bayside Realty, LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records. ted Liability Company)	)
he Articles of Organization for this Limited Liability Compa	any were filed on 12-23-2016	and assigned
lorida document number L16000231519		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited I	iability company here:	
effrey J. Benson, LLC		
ne new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
• • •		- a ci
<u>rincipal office address MUST BE A STREET ADDRESS</u>	2	-41
		• [,]
		- ()
nter new mailing address, if applicable:		- •
, ,		* *
failing address MAY BE A POST OFFICE BOX)		
		<u> </u>
If amending the registered agent and/or registered gistered agent and/or the new registered office address		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		rida
	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
			□ Add
			☐ Remove
		☐ Change	
		<del> </del>	□ Remove
		<del></del>	☐ Change
	<del></del>		
			Change
		☐ Add	
			Remove
			□ Change
		Add	
	<del> </del>	Remove	
			☐ Change
			□ Remove
			Change

amending any other information, enter change(s) here: (Attach additional sheets, if necessar	
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	L
ffective date, if other than the date of filing:  2-7-2018  (optional an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date occument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. The 90th day after the record is filed.	. on the earlier o
2 - 7 - 18	
	2 · 7
Signature of a member or authorized representative of a member	- (,
_	•
Typed or printed name of signee	• •

Page 3 of 3

Filing Fee: \$25.00