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FEB 02 2017 S. YOUNG SECRETARY OF STATE TALLAHASSEE, FLORID

## **COVER LETTER**

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, SUBJE		Ioldings, LLC		·	
SOBJE	C1	Name of Lim	ited Liability Company	<del>.</del>	
The enc	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		H. Bart Fleet, Esq.			
			Name of Person		
		Fleet & Smith			
			Firm/Company		
		1283 Eglin Parkway, Suite	e A		- F.S.
			Address		五 经
		Shalimar, FL 32579			LLAHASSEE, FLORIDA
			City/State and Zip Code		P. Fig.
		bart@fleetsmithlaw.com  F-mail address: (	to be used for future annual repo	rt notification)	FĽÖRIDA H 4: 30
For furth	ner information c	concerning this matter, please co	•	( nomication)	30
Patty Re	egister		850 651-40	06	
	Name o	f Person	at () Area Code E	aytime Telephone Number	
Enclose	d is a check for t	he following amount:			
□ \$25	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	) Certified (	e of Status &
		ING ADDRESS: ration Section	STREET/CO	DURIER ADDRESS: Section	

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Florida document number L1700002194  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 "LLC."  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 name of th	Bavarian Holdings, LLC		
Florida document number L17000002194  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 "LLC."  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 neregistered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records Liability Company)	<u>.</u> )
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 neregistered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	The Articles of Organization for this Limited Liability Company Florida document number L17000002194.	were filed on January 4, 2017	and assigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  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 neregistered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida			
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Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
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New Registered Office Address:  Enter Florida street address , Florida	registered agent and/or the new registered office address here	<u>e</u> :	
Enter Florida street address , Florida	Name of New Registered Agent:		
	New Registered Office Address:		
		Enter Florida street address	
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			Zip Code
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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>	Type of Action
MGR	Denise Bavarian	313 Country Club Road	
		Shalimar, FL 32579	Remove
			Change
			Add
		:	Remove.
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