## 117000129779

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## **COVER LETTER**

	Registration Se Division of Cor				
SUBJEC	BCP EQUI	TIES, LLC			
SUBJEC	.1:	Name of Lim	ited Liability Company		
The encle	osed Articl <del>e</del> s of .	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ndence concerning this matter	to the following:		
		CLAYTON DINGLE		•	
			Name of Person		
BISCAYNE CAPITAL PARTNERS, LLC					
			Firm/Company	<del></del>	
1835 NE MIAMI GARDENS DR #196					
			Address		
		MIAMI, FL 33179			
City/State and Zip Code					
		cpdingle@hotmail.com		<del></del>	
		E-mail address: (	to be used for future annual report notifi-	cation)	
For furth	er information co	oncerning this matter, please co	ill:		
CLAYTO	ON DINGLE		305 925.4251		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed	is a check for th	ne following amount:			
□ \$25.0	00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	S55.00 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
Clitton Building
2661 Executive Center Circle
Tallahassee, FL 32301

2011 AUG ~6 PH 2: 42
SECKETARY OF STATE

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	<del></del>
The Articles of Organization for this Limited L Florida document number L17000129779	Liability Company	were filed on JUNE 14, 2017	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company bere:	
CARPE DIEM EQUITIES, LLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		N/A	
		N/A	-
		N/A	•
Inter new mailing address, if applicable:		N/A	
Mailing address MAY BE A POST OFFICE	(ROX)	N/A	
Maning dualess MAT BE AT OST OFFICE BOXY		N/A	<del>-</del>
3. If amending the registered agent and egistered agent and/or the new registered of			r the name of th
Name of New Registered Agent:			
New Registered Office Address:	N/A		
		Enter Florida street address	
	N/A		N/A
		City	Zıp Code

New Registered Agent's Signature, if changing Registered Agent:

BCP EQUITIES, LLC

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.

H Changing Registered Agent, Signature of New Registered Agent

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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
N/A	N/A	N/A	Add
		N/A	□ Remove
		N/A	Change
			Add
			□ Remove
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SECREPART OF STATE

	N/A				
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(If ar	ective date, if other than the date of filing:    N/A   (optional)	.0207 (3 kb) ed as the			
doc					
doo If the	record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earliche 90th day after the record is filed.	er of:			
doo If the	The 90th day after the record is filed.	er of:	SEI IALL	2018	-
doo If the (b) T	AUGUST 6	er of:	SECKE D FALLAHA	2010 AUG	
doo If the (b) T	The 90th day after the record is filed.	er of:	SECRETARY FALLAHASSE	2010 AUG - 6	

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Filing Fee: \$25.00