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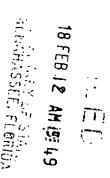
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COVER LETTER

	BDG Lamr	olight Holdings, LLC							
SUBJECT: Name of Limited Liability Company									
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.						
Please return	all correspo	ndence concerning this matter	to the following:						
		Carlos Yepes							
			Name of Person						
		c/o Belleair Development							
		·	Firm/Company						
		6654 - 78th Avenue North							
			Address						
		Pinellas Park, FL 33781							
			City/State and Zip Code						
		CYepes@belleairgroup.con							
		E-mail address: (to be used for future annual report notifi	ication)					
For further in	formation c	oncerning this matter, please ca	all:						
Carlos Yepes	S		727 536-8686 at ()						
	Name o	f Person		Telephone Number					
Enclosed is a	check for the	ne following amount:							
□ \$25.00 Fi	iling 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**

BDG Lamplight Holdings, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{1/3/18}{2}$ and assigned Florida document number _____L18000002861 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BDG Lamplight Village Holdings, LLC 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: æ (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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

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		
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			□ Remove		
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Typed or printed name of signee

Filing Fee: \$25.00