118000022999

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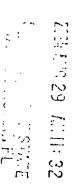


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COVER LETTER

Div	ision of Corp	orations			
SUBJECT:	BBG POINC				
SOBOLC I.		Name of Limi	ted Liability Company		
The enclosed	f Articles of A	mendment and fee(s) are sub-	mitted for filing.		
		dence concerning this matter			
rease return	i un correspon	denot containing in a marror	to the rono wing.		
		FERNANDO BRAFF			
			Name of Person		
		BBG POINCIANA LLC			
			Firm/Company		
		6735 CONROY RD STE	301		
	Address				
		ORLANDO, FL 32835			
	City/State and Zip Code				
		FERNANDO.BBG.GROUP	@GMAIL.COM		
		E-mail address: (to be used for future annual report noti	fication)	
For further is	nformation co	ncerning this matter, please ca	all:		
FERNAND	O BRAFF		407 376-8804		
Name of Person			ne Telephone Number		
Enclosed is	a check for the	following amount:			
■ \$25.00 I	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
M-	ili-n Adduses		Street Address		

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BBG POINCIANA, LLC

BBO FOINCIANA, ELC		
(Name of the Limited Liability Compan (A Florida Limited Lia	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company vilorida document number L18000022999	vere filed on 01/25/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	ty 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)		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		. <u></u>
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ddress on our records, enter the na	me of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
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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.

City

Florida

Zip Code

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
MGR	BBG REAL ESTATE INVESTME	6735 CONROY RD STE 301	
		ORLANDO, FL 32835	■Remove
			□Change
MGR	BBG GROUP FLORIDA, LLC	6735 CONROY RD STE 301	
		ORLANDO, FL 32835	□Remove
			□ Change
			□Add
			□Remove
			□Remove
			□Change
			□ Add
			□Remove
			Change
			□ Removes
			□ Change

record is filed.	ecifies a delayed effe	cuve date, but no	t an effective tim	e, at r∠:01 a.m. on	the earlier of: (b)	The 90th day af	ter ine
(If an effectiv <u>Note:</u> If the document'	ve date is listed, the date he date inserted in thi 's effective date on th	must be specific an s block does not e Department of	d cannot be prior to meet the applicab State's records.	le statutory filing r	equirements, this	date will not be li	sted as the
F Effective	date, if other than	the date of filin	08/26/2024		(option	nalì	_
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