L18000150787

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Y SULKER OCT 25 2019

COVER LETTER

SUBJECT:	BBW GROUP LL	С	
30000CT.	Name of Lin	ited Liability Company	
The enclosed Articles o	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	SISSY SANCHEZ DE AL	DARMES	
	BBW GROUP LLC	Name of Person	
	ZIAL BODDIOV CID	Firm/Company	
	3191 RODRICK CIR	Address	
	ORLANDO, FL. 32824		
	magalynfms@gmail.com	City/State and Zip Code	
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report notifi	ication)
SISSY SANCHEZ DE		786 450-7934	
Name	of Person		Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing 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

TO:

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

	BBW GROUP LLC	
(Name of the Lim	ited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) pany)
The Articles of Organization for this Limited I	Liability Company were filed	on 06/19/2018 and
Florida document number L18000150787	·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability comp	iny here:
he new name must be distinguishable and contain the	words "Limited Liability Company	"the designation "LLC" or the abbreviation
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	····
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B. If amending the registered agent and egistered agent and/or the new registered of	l/or registered office addre	ess on our records, enter the factor
Name of New Registered Agent:	SISSY E. SANCHEZ CAM	IARGO
New Registered Office Address:	3191 RODRICK CIR	
	En	ter Florida street address
	ORLANDO	, Florida
	City	Zip Cod

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 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.

f Changing Registered Agent, Signature of New Registered Agent

11 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each poor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	<u>T·</u>
AMBR	SISSY E. SANCHEZ DE ADARMES	3191 RODRICK CIR, ORLANDO, FL 32824	С
		· · · · · · · · · · · · · · · · · · ·	
AMBR SISSY E. SAN CAMARGO	SISSY E. SANCHEZ CAMARGO	3191 RODRICK CIR ORLANDO, FL. 32824	
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ffaat	ive date, if other than the date of filing: (optional)
fan efi	ive date, if other than the date of filing: (optional) [ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list
locum	ent's effective date on the Department of State's records.
o ro	cord charifies a delayed effective date, but not an effective time, at 13,01 a.m. on the new
The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli 90th day after the record is filed.
1110	Sour day diter the record is filed.
ated	10/01 2019
	A Chelles Macheles
	Signature of a thember or authorized representative of a member
	Sissy E. Sanchez Camargo. Typed or printed name of signer
	Typed or printed name of cianas

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Filing Fee: \$25.00