# 48000214304

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
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(Business Entity Name)					
(Document Number)					
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## **COVER LETTER**

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BMK Tradings, LLC									
SUBJI	:C1:		Name of Limi	ted Liability Company					
The en	closed Art	icles of Ar	nendment and fee(s) are subn	nitted for filing.					
Please	return all	correspond	ence concerning this matter t	to the following:					
			Marianne Dominguez						
				Name of Person	<del></del>				
			CB Restaurant Group LLC						
				Firm/Company	<del></del>				
			2299 Pearl Cider Street						
				Address	<del></del>				
			Orlando, FL 32824						
			MDominguez@CasaBorinqu	City/State and Zip Code nen.com	<del></del>				
			E-mail address: (t	o be used for future annual report notific	cation)				
For fur	ther inform	nation con	cerning this matter, please ca	dl:					
Maria	nne Domi	inguez		954 558-6574					
		Name of P	erson	at () Area Code Daytime	Telephone Number				
Enclos	ed is a che	ek for the	following amount:						
\$2:	5.00 Filing	g 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

BMK Tradings, LLC		
(Name of the Limited Liabili (A Florid	ty Company as it now appears on our recor a Limited Liability Company)	ds.)
The Articles of Organization for this Limited Liability C Florida document number L18000214304	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		; <del>"</del> "
(Principal office address MUST BE A STREET ADDI	RESS)	19 SEI
		ARI SSS
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	0:2 A
		<del></del>
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our record ress here:	ls, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	.5.5
		lorida
	City	Zıp Code

#### 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

#### MGR = Manager AMBR = Authorized Member

	Name	Address	Type of Action			
-	BMK Management LLC	2299 Pearl Cider Street Orlando, FL 32824				
			■ Remove			
			Change			
-	CB Restaurant Group LLC	2299 Pearl Cider Street Orlando, FL 32824				
			П Rетюче			
			Cl Change			
_			Add			
			□ Remove			
			D Change	E.o.		
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			CI Remove	1884 1884	<u> </u>	アニカウ
			□ Change		## ## ##	
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				,-		
			☐ Change			
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			Remove			
			☐ Change			

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Typed or printed name of signee

Marianne Dominguez

Filing Fee: \$25.00