

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BARBOSA LEGAL Account Number : I20110000049 Phone : (305)501-4680 Fax Number : (305)359-9543

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: RENEWALS@BARBOSALEGAL.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 13 BMG BUSINESS & ENTERTAINMENT, LLC

Certificate of Status	0
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Page Count	05
Estimated Charge	\$55.00

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EXAMINER

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

TO: Registration Sec Division of Cor				
	USINESS & ENTERTAINME	NT, LLC		
SUBJECT:	Name of Limi	ted Liability Company	·	
	Amendment and fee(s) are sub			
Please return all correspo	ndence concerning this matter	to the following:		
	Bruna Barbosa			
		Name of Person		
	Barbosa Legal			
		Firm/Company		
	407 Lincoln Road PH-NE			
		Address		25 25
	Miami Beach FL 33139			2018 NOV
		City/State and Zip Code		V-9 PM 1:28 DVRY OF STATE DASSEE/FLORID
	renewals@barbosalegal.com			0 K3
		to be used for future annual report notifi	canon)	유 문
For further information c	oncerning this matter, please or	all:		#2
Bruna Barbosa		305 501-4680 at ()		—————————————————————————————————————
Name o	f Peison	Area Code Daytime	Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is euclosed)	Certified (of Status &
Registi Divisio	ING ADDRESS: ration Section on of Corporations	STREET/COURING Registration Section Division of Corpora	1	
	ox 6327 assec, FL 32314	Clifton Building 2661 Executive Cer	iter Circle	

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Tallahassee, FL 32301

Tallahassee, FL 32314

11/09/18 11:13AM EST Barbosa Legal -> Division of Corporations

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

13 BMG Business & Entertainment, LLC		
(Name of the Limited Liab) (A Florid	lity Company as it now appears on our record da Limited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability	Company were filed on 10/02/2018	and assigned
Florida document number L18000256636	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
13 BGM Business & Entertainment, LLC		
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC	2" or the abbreviation "L.L C."
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADD	ORESS)	50 2
		-
Enter new mailing address, if applicable:	N/A	9 PH
(Mailing address MAY BE A POST OFFICE BOX)		OT
		28
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	istered office address on our record dress here:	ls, <u>enter the name of the ne</u>
Name of New Registered Agent: N/A		
New Registered Office Address:		
	Enter Florida street addre	253
<u> </u>		lorida
	City	Zip Codu

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

11/09/18 11:13AM EST Barbosa Legal -> Division of Corporations 8506176383 Pg 4/5

(((II18000323476 3)))
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>	Name	Address	Type of Action
			□ Remove
			Change
<u>_</u>			Add
			□ Remove
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D. If amendi	ing any other information	((([]] , enter change(s) he	180003234 ⁻ re: <i>(Attach add</i>	16 3))) littonal sheets, if ne	ecessary.)	
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(If an effecti Note: If t	date, if other than the date we date is listed, the date must be he date inserted in this block is effective date on the Department.	specific and cannot be pu- does not meet the app	licable statutory	or more than 90 days at	ctional) der filing.) Pursu his date will n	ant to 605.02 of be listed
If the record (b) The 90	d specifies a delayed ef Oth day after the record	fective date, but r	not an effectiv	ve time, at 12:01	la,m. on th	e earlier
Dated No	ovember 09th	2018	<u></u> .			
		Barbosa		nive of a member		
	Bruna Barbosa, authorized	representative				
			inted name of sign			

Page 3 of 3

Filing Fee: \$25.00