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2019 JAN 18 PH 12: 55



COVER LETTER

	istration Se sion of Cor				2	
SUBJECT:	RED MAC	AW, LLC		•		
OBJECT:		Name of Limited Liability Company				
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.		2019 JAN 18 PAIL ON B	
Please return	all correspo	ondence concerning this matter	to the following:		SEE C	
		ADAM RIGEL				
		-	Name of Person		_	
	JWB REAL ESTATE COMPANIES, LLC					
	Firm/Company					
	7563 PHILIPS HWY BLDG 100 STE 208					
	Address					
JACKSONVILLE, FL 32256 City/State and Zip Code ADAM@JWBCOMPANIES.COM						
					_	
		E-mail address: (to be used for future annual rep	ort notification)		
For further in	formation c	oncerning this matter, please ca	all:			
ADAM RIGI	EL		904 677-6	777		
	Name o	f Person	at () Area Code	Daytime Telephone Numbe	er	
Enclosed is a	check for th	ne following amount:				
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	ate of Status &	

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

RED MACAW, 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 Comp	pany were filed on DECEMBER 27, 2018	and assigned
Florida document number L19000001614		. .
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
BCEL 10A, LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u>s)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	here:	
registered agent and/or the new registered office address		
registered agent and/or the new registered office address	here:	
<u>Name of New Registered Agent:</u>	Enter Florida street address	
<u>Name of New Registered Agent:</u>	Enter Florida street address	
<u>Name of New Registered Agent:</u>	Enter Florida street address, Florida	

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
			Add
			☐ Remove
			☐ Change
			Add
			☐ Remove
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			Change

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ective date, if other than the offective date is listed, the date must	date of filing:	(optional) of filing or more than 90 days after filing.) Pursuant to 605.0
e: If the date inserted in this blo ument's effective date on the De	ck does not meet the applicable sta	atutory filing requirements, this date will not be listed
		ffective time, at 12:01 a.m. on the earlier
ne 90th day after the reco	ra is filea.	
JANUARY 14 ed	2019	
	12/21/11/11	
(Mac R	epropentative of a member

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Typed or printed name of signee

Filing Fee: \$25.00