# L20000 26 1106

(Re	equestor's Name)	
(Ac	fdress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		NO\$

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 13, 2020

HEIDIE D ALVARADO 3836 ASPEN LEAF DRIVE BOYNTON BEACH, FL 33436

SUBJECT: BMG CORP L.L.C Ref. Number: L20000261106

We have received your document for BMG CORP L.L.C, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 020A00022800

Shelia S Young Regulatory Specialist II

www.sunbiz.org

Division of Communitions D.O. DOV COOR Mullaharras Elacida 2001 A

## COVER LETTER

TO: Registration S Division of Col			
SUBJECT: DMG	1 (cm // (	1	
SUBJECT: 1/1/15	Name of Limi	ted Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspondent	ondence concerning this matter t	to the following:	
	<u>l</u> teidie	D. Avarado	)
		Firm/Company	<del></del>
	3836 Asper	n Kaf Dr. Address	
	Boynton Dec Heidie Alvo	City/State and Zip Code  Out Code  O	3436 1. Con-
For further information of	concerning this matter, please ca	At:	
Herric D	1CIVE PANJCIVCIC		- 8988 e Telephone Number
Enclosed is a check for t	he 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 Addre Registration Division of C P.O. Box 632	Section Corporations	Street Address: Registration Sec Division of Cor The Centre of T	porations

RECEIVED OCT 0 6 ZUZU

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### FLORIDA DEPARTMENT OF STATE **Division of Corporations**

January 7, 2021

HEIDIE D ALVARADO 3836 ASPEN LEAF DRIVE BOYNTON BEACH, FL 33436

SUBJECT: BMG CORP L.L.C Ref. Number: L20000261106

We have received your document for BMG CORP L.L.C and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II Supervisor Letter Number: 821A00000297

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BMG C	XN L.L.C	2011 20 FT 2: 00
( <u>Name of the Limited Lia</u> (A Flo	ability Company as it now appear orida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited Liability Florida document number <u>L2COOQ</u>	ty Company were filed on	8/2W2020 and assigned
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the		
Enter new principal offices address, if applicable:	<del></del>	
Principal office address MUST BE A STREET AL	ODRESS)	
	<del></del>	
Enter new mailing address, if applicable:	<del></del>	
Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or regist agent and/or the new registered office address here.		ecords, enter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flor	ida street address
<del></del>	City	, FloridaZip Code
	J.,,	<b>f</b>

#### 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.

amending Authorized Person(s) authorized to manage,	enter the title, name,	and address of each pe	rson
r removed from our records:			· •

MGR =	Manager *	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
	<del></del>		□AdJ
			□Remove
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	hangng BMGI Corp IIC.
	to
	BMG L.L.C
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:Hec :: H	e date, if other than the date of filing:
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
file	
d _	1/23/2021
	Signature of a member or authorized representative of a member
	Heidie Allarado
	Typed or printed name of signee