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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : R&P ACCOUNTING AND TAXES INC

Account Number : I20170000090

: (305)358-1310

Fax Number

: (305)503-6701

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

Email Address: arad 8723@Gmzi

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN/ **BPG MIAMI LLC**

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TEST & S NAU

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BPG MIAI	MI LLC .	
(Name of the Limited Liability Com	pany as it now appears on our records.) d Liability Con:pany)	
(A PIONOR LIMITE	1 Liability Company)	
The Articles of Organization for this Limited Liability Compar	ny were filed on 01/08/2021 and assigned	d
131000007366		
Florida document number	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited list	bility company here:	
The new name must be distinguishable and contain the words."Limited Lia	bility Company "the designation "LLC" or the abbreviation "LLC"	<del></del>
The new harde thatst de distinguishable and contain the words. Entitled Ela	omy company. The designation of the desired states	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
•	And the state of t	
·		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
· · · · · · · · · · · · · · · · · · ·		
		<del></del>
B. If amending the registered agent and/or registered offic	anddrage on our records enter the name of the new rec	pistered
agent and/or the new registered office address here:	e address on our records, enter the name of the new reg	<u>Elster e to</u>
agent and/of the new registered office address nerve.		
	· ·	
Name of New Registered Agent:	<u> </u>	<del></del> . •
Now Basistanad Office Address:		
New Registered Office Address:	Enter Florida street address	
	, Florida N	
•	Ciry Zip Cule	
New Registered Agent's Signature, if changing Registered Agen	ıt:	
I hereby accept the appointment as registered agent and ag	eree to act in this capacity. I further agree to comply w	ith the
provisions of all statutes relative to the proper and comple	te performance of my duties, and I am familiar with an	ıd
accept the obligations of my position as registered agent a	s provided for in Chapter 605. F.S. Or, if this documen	it is
being filed to merely reflect a change in the registered offic	ce address, I hereby confirm that the limited liability.	
company has been notified in writing of this change.		
المعادلة في والصفيح الما منعوان المساوية على ولك المستنسسية <u>لانويسارين.</u> 	and the state of t	

If Changing Registered Agent, Signature of New Registered Agent

13055036701

MGR = Manager

If amending Authorized Person(s)	authorized to manage	, enter the title, name	and address of	each person being added
or removed from our records:		•		

Title .	<u>Name</u>	Address	Type of Action
110e	Name	Addition	- 1900 100
			□Add
			□Remove
			Change
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			□Remove
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