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(((H220001463843)))



H220001463843ABC/

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CS SUNBIZ, LLC Account Number : I20040000164

Phone :

: (407)691-5600

Fax Number

: (407)691-5620

**Enter the email address for this business entity to be used for future.

annual report mailings. Enter only one email address please.**

Email Address: KWHITE@AHG-GROUP.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BCS CLE OZ INVESTMENTS, LLC

Certificate of Status	0
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C. BRUMBLEY APR 2 6 2022

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(((H22000146384 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BCS CLE OZ INVESTMENTS, LLC	
(Name of the Limited Liability Company as it n	ow appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fil	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) anization for this Limited Liability Company were filed on November 8, 2021 and assigned submitted to amend the following: me, enter the new name of the limited liability company here: distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." all offices address, if applicable: direct MUST BE A STREET ADDRESS)
Florida document number L21000478094	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	npany here:
	20
The new name must be distinguishable and contain the words "Limited Liability Compa	any," the designation "LLC" or the abbreviation "L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Trimitipal office address Mode BB 718 (RBD) (BB 718)	P 600
	170
Enter new mailing address, if applicable:	
[Maning address MAT BE A FOST OFFICE BOX)	
 -	
B. If amending the registered agent and/or registered office ad- registered agent and/or the new registered office address here:	dress on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Div. 44.
City	, Florida Zip 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

☐ Change

(((H22000146384 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Remove
			Change
			Add
			Remove
			□ Change
			☐ Remove
			Add
			Remove
			Change
			Remove
			☐ Change
			
			□ Remove

	The purposes of the Company shall be to invest in "qualified opportunity zones" within the meaning of Section
	1400Z-1(a) of the Internal Revenue Code of 1986 (the "Code"), to be a "qualified opportunity zone business"
	within the meaning of Section 1400Z-2(d)(3) of the Code, and to engage in any other activities to which the
	members of the Company approve in accordance with the Operating Agreement of the Company."
(If an e	ctive date, if other than the date of filing:
the r) Th	ecord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier one 90th day after the record is filed.
Date	April 22 , 2022

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Filing Fee: \$25.00