## L2200183255

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DATE:

06/23/22

NAME: BCD RAVER HOLDINGS 2, LLC

TYPE OF FILING: AMENDMENT

COST:

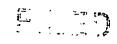
25.00

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AUTHORIZATION: ABBIE/PAUL HODGE

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 JUH 23 AM 9: 44

BCD RAVER HOLDINGS 2, LLC

(Name of the Limited Liability	Company as it now appears on our reco imited Liability Company)	ords.)* 531	
(A Florida L	imited Liability Company)	MULLIN JOHN AT	
The Articles of Organization for this Limited Liability Con	mpany were filed on 05/03/2022	and assigned	
Florida document number 1.22000183255			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "Li	.C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u>(SS)</u>	<u>-</u>	
		<del></del>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	office address on our records, <u>ente</u>	er the name of the new registere	
Name of New Registered Agent:			
New Registered Office Address:		<del></del>	
	Enter Florida street addr	ess	
	, F	Tlorida Zip Code	
New Registered Agent's Signature, if changing Registered A		Zip Code	
· · · · · · · · · · · · · · · · · · ·			
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comaccept the obligations of my position as registered agenceing filed to merely reflect a change in the registered accompany has been notified in writing of this change.	plete performance of my duties, on the as provided for in Chapter 605	und I am familiar with and , F.S. Or, if this document is	
ĩ	f 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
AMBR	BRYSON RAVER	217 N. HOWARD AVENUE, SUITE 200	
		TAMPA, FLORIDA 33606	≣Remove
			□Change
MGR BRYSON RAVER	217 N. HOWARD AVENUE, SUITE 200	<b>=</b> Add	
		TAMPA, FLORIDA 33606	□Remove
			□Change
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rument's effective date on the Department of State's records.	ica a
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after a filed.	er the
ed June 22 . 2022	
Signature of a member or authorized representative of a member	
Bryson Raver	

Filing Fee: \$25.00