

L22000531972

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : SOUSA & ASSOCIATES INC  
Account Number : I20190000111  
Phone : (407)800-7028  
Fax Number : (407)992-9407

2022 JAN -4 AM 11:27  
FILED  
JAN 4 2023  
TALLAHASSEE, FL  
CLERK OF COURT

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

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
104 & 205 S GROVE LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

JAN 05 2023  
A. LUNT

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 104 & 205 S GROVE LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are  
submitted for filing. Please return all correspondence  
concerning this matter to the following:

Maria C Sousa  
Name of Person

SA Finance & Accounting Inc  
Firm/Company

5728 Major Blvd Ste 309  
Address

Orlando Florida 32819  
City/State and Zip Code

contactus@sousaacc.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria C Sousa at ( 407 ) 8007028  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

■

Mailing Address:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

104 & 205 S GROVE LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

2022 JAN -4 AM 11:27

The Articles of Organization for this Limited Liability Company were filed 01/15/2023 and assigned on Florida document number L22000531972

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

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

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	BCR HOLDINGS LLC	2890 S US HWY 1792	<input type="checkbox"/> Add
		CASSELBERRY, FL 32707	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Brothers Investments Holding LLC	2890 S US HWY 1792	<input checked="" type="checkbox"/> Add
		CASSELBERRY, FL 32707	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated January, 04, 2023

Signature of a member or authorized representative of a member

Typed or printed name of signee