23000122464

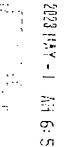
	-	
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
()		
(Cit	ty/State/Zip/Phone #)	
	_	—
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	
,		
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
		i
 ,		

Office Use Only



000407797460

05/01/23--01035--002 **25.00



A. RIVERS JUN 19 2023

COVER LETTER

TO:	Registration S Division of Co		ns		
SUBJE	cr. Rt	16H	sarvices	s LLC	
SUBJE	.c 	-	Name of Lim	ited Liability Company	
The end	losed Articles o	f Amendn	nent and fee(s) are sub	mitted for filing.	
Please 1	eturn all corresp	ondence o	concerning this matter	to the following:	
		•	Biviana M	1 Gutierrez Hin	capie
			•	Name of Person	
			(Bush	
				Firm/Company	
			11402 WI	nistling Pine wa	4
				Address	
			Orlando	/Florida / 32833	<u>></u>
				City/State and Zip Code	
			biviana	ghi72gmail.com	<u>) </u>
			·	to be used for future annual report notif	fication)
For furt	her information	concernin	g this matter, please or	all:	
\mathcal{E}	proivid	Ent	ショントン	1924 (FOV) 16	8F) I
	Name	of Person		Area Code Daytime	: Telephone Number
Enclose	ed is a check for	the follow	ring amount:		
A \$25	5.00 Filing Fee		0.00 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 Addr Registration			Street Address: Registration Sec	etion

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BMGH Services LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ___O3/O8/2023__ and assigned Florida document number <u>L23000122464</u> 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: Biviana M. Gutierrez Hincapie ??

11402 Whistling Pine Way

Enter Florida street address

Orlando , Florida 32832

City Zip Code Name of New Registered Agent: New Registered Office Address:

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>	Name	<u>Address</u>	Type of Action
MER	Biviano Moutierre	ez Hincapie 11402 whistlin	gPineWay []Add
			□ Remove
			≅ Change
		<u></u>	Remove
			Change
		<u></u>	□ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			□ Remove
			□ Change
			□Add
			Remove
			□ Change

									_
	<u>.</u>								_
								 	_
					. <u>-</u>				_
									_
					· 	<u> </u>			_
	<u>.</u>								_
				 				<u> </u>	_
			<u> </u>						_
	<u></u> _						-		_
	_								_
						••	_ 		-
						· - ·			_
						·			-
							-		_
									_
effecti <u>e:</u> If t	ve date is listed, the date inserte	d in this block	specific and does not m	cannot be prior eet the applic	able statutory			nal) iling.) Pursuant to 60 date will not be li	
ment	's effective dat	te on the Depart	tment of St	ate's records					
ord sp filed.		ed effective dat	te, but not a	an effective ti	me, at 12:01	a.m. on the e	arlier of: (b)	The 90th day aff	ter ti
	April	26 ()	,	<u>2023</u>	·				
d				1. 1					
d			5.5.	\mathcal{M}					

Filing Fee: \$25.00