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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Bed	Mar72L.L.C		
30bite1	Name of Limi	ted Liability Company	-
The enclosed Articles of Ar	nendment and fee(s) are subr	nitted for filing.	
Please return all correspond	lence concerning this matter t	to the following:	
	Beryely 1	Name of Person	
	_		
	BerMor 72	L·L·C· Firm/Company	
	1457 Spring	leaf Drive	
	OLWWG DE	City/State and Zip Code	*~1
	Marlene maha E-mail address: (1	raj 35 e.g. mail Com to be used for future annual report notification	on) : 3
For further information con	neerning this matter, please ca	all:	, co
Bervely M	cahnaj	at (773 562 615 Area Code Daytime Tel	
Name of F	Person	Area Code Daytime Tel	ephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Se Division of Co	ection rporations	Street Address: Registration Sectio Division of Corpor The Centre of Talla	ations
P.O. Box 6327 Tallahassee, Fl		2415 N. Monroe St	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BerMar72	L.L.C.			
(Name of the Limited	d Liability Company A Florida Limited Lia	as it now appears on our bility Company)	records.)	
The Articles of Organization for this Limited Lia Florida document number $\frac{L}{23000}$		vere filed on <u></u> <u><u></u> <u><u></u> <u> <u> </u></u></u></u>	- 23	_ and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of	the limited liabili	ity company here:		
The new name must be distinguishable and contain the wo	ords "Limited Liability	y Company," the designation	n "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applica	ble:			
(Principal office address MUST BE A STREET	(ADDRESS)			
			-	
				ထ်
Enter new mailing address, if applicable:				<u> </u>
(Mailing address MAY BE A POST OFFICE B	(<u>OX)</u>			<u> </u>
			<u> </u>	-
B. If amending the registered agent and/or reagent and/or the new registered office address		ldress on our records,	enter the name	of the new registered
Name of New Registered Agent:	Revel	y Marlene	Maharaj	
New Registered Office Address:	1457 Spr	ingleaf Driv Ener Florida stree	/ C n address	
	Ormond 1	Beach	, Florida <u>3</u>	2174
		City		Zip Code
New Registered Agent's Signature, if changing R	egistered Agent:			
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the re	er and complete p tered agent as pr	performance of mv du rovided for in Chapte	ties, and I am fai r 605, F.S. Or, if	miliar with and this document is

company has been notified in writing of this change.

Beyeli, Mahary
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>	Address	Type of Action
MGR	Berkely Mahery	1457 Springbert Drue Or besen FL. 32174	monel (\$Add
			□Remove
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Ted 5-02-23 Beyou Mohan Signature of a member or authorized representative of a member	is filed.		
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