Division of Corporations



**Note:** Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : VENERABLE CORPORATE AND TRUST SERVICES, LLC

Account Number : I20210000107 Phone : (813)284-4727

Fax Number : (813)436-8460

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

Email Address:\_\_\_\_\_jsampson@venerable.law

PER FUG -3 NA 11: 30
DEPARTMENT OF STATE IS
DIVISION OF CORPORATIONS
TALLAMASSIE. FLORIDA

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BFF COASTAL PROPERTY MANAGEMENT LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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Corporate Filing Menu

Help

K. SALY

AUG - 4 2023

Registration Section

To:

TO:

## **COVER LETTER**

Division of Co	rporations		
BFF COAS	STAL PROPERTY MANAGE	MENT LLC	
SUBJECT:	Name of Lin	nited Liability Company	_
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Jason Sampson		
		Name of Person	<del></del>
	Venerable Corporate & Tr	usi Services, LLC	
	<del></del>	Firm Company	<del></del>
	301 West Platt Street, No	. 657	
		Address	
	Tampa, FL 33606		
		City/State and Zip Code	<del></del>
	jsampson@venerable.law		_
	E-mail address: (	to be used for future annual report notification)	
For further information of	concerning this matter, please of	all:	
jsampson@venerable.law		813 2844727	
Name (	of Person	at () Area Code Daytime Felephone Nun	iber
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certificadditional copy is enclosed) Certificational copy is enclosed.	O Fifing Fee, ficate of Status & fied Copy onal copy is enclosed)
MailingAddres Registration Division of C P.O. Box 633 Tallahassee.	Section Torporations 27	StreetAddress: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suit- Tallahassee, FL 32303	e 810

To:

If Changing Registered Agent, Signature of New Registered Agent

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

## BFF COASTAL PROPERTY MANAGEMENT LLC

TO
ARTICLES OF ORGANIZATION
OF OF
BET COASTAL PROPERTY MANAGEMENT LLC
ARTICLES OF ORGANIZATION OF  BFF COASTAL PROPERTY MANAGEMENT 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 06/20/2023 and assigned 5
Florida document number L23000296147
Tronga document framoet
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 "LLC."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Trincipal office and ess most be ristreet monkers
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:
Hame of New Negation rights
New Registered Office Address:
Enter Florida street address
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 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	TURNER, ARTHUR G	3004 CORRIB DRIVE	□Add
		TALLAHASSEE, FL 32309	<b>≘</b> Remove
			□Change
AR	TURNER, SHANDA V	3004 CORRED DRIVE	
		TALLAHASSEE, FL 32309	■ Remove
		<del></del>	Change
MGR	TURNER, BRYAN J	3004 CORRIB DRIVE	
		TALLAHASSEE, FL 32309	□Remove
			<b>■</b> Change
			□Add
			Change
			□ Add □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
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ffective date, if other than the an effective date is listed, the date mutote: If the date inserted in this becoment's effective date on the I	lock does no	ot meet the app	licable statutor	ng or more than 90 y filing requirer	(optional days after filin nents, this dat	) 2.) Pursuant to 605, e will not be liste	.0207 (. ed as tl
record specifies a delayed effecti Lis filed	ve date, but i	not an effective	time, at 12 01	a monthe car	ier of (b) T	The 90th day after	· the
ated August 3		2023					
				ntative of a memb			