

L23000519145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

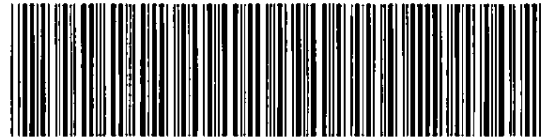
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TALLAHASSEE, FLORIDA

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GOLDMAN ATTORNEYS PLLC

Attorneys and Counselors at Law

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ALBANY, NEW YORK 12205

TELEPHONE: (518) 431-0941
FAX: (518) 694-4821

Audrey Michasiow
Legal Assistant
amichasiow@goldmanpllc.com

November 30, 2023

VIA FEDERAL EXPRESS

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: **BBLbc FL, LLC**
Articles of Amendment to Articles of Organization

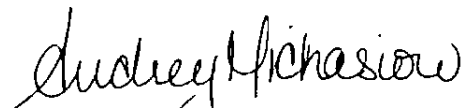
Dear Sir/Madam:

Enclosed herewith for filing in your office, please find Articles of Amendment to Articles of Organization in duplicate for the above referenced limited liability company, together with our firm's check in the amount of \$55.00 to cover the filing fee (\$25) with a certified copy (\$30).

Should you have any question, please do not hesitate to call me.

Very truly yours,

GOLDMAN ATTORNEYS PLLC



Audrey Michasiow, Legal Assistant

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BBLBC FL, 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:

Paul J. Goldman, Esq.
Name of Person
Goldman Attorneys PLLC
Firm/Company
255 Washington Avenue Extension, Suite 108
Address
Albany, New York 12205
City/State and Zip Code
kskiba@bblbuildingco.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kim Skiba at (518) 213-1010
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|--|---|--|

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**

BBLbc FL, 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 November 16, 2023 and assigned Florida document number 123000519145.

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>
MGR	BBLBC Manager LLC	22 Century Hill Drive, Suite 201	<input type="checkbox"/> Add
		Latham, New York 12110	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Matthew J. Bette	22 Century Hill Drive, Suite 201	<input checked="" type="checkbox"/> Add
		Latham, New York 12110	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Peter J. Bette	22 Century Hill Drive, Suite 201	<input checked="" type="checkbox"/> Add
		Latham, New York 12110	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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TALLAHASSEE, FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00