

3/27/2024 3:36 PM

Division of Corporations

No. 2332

L24000120754

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H24000114302 3)))



H240001143023.ABCR

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : RABIDEAU KLEIN
Account Number : I20200000035
Phone : (561)655-6221
Fax Number : (561)655-3221

FILED
2024 MAR 27 PM 2:09
TALLAHASSEE, FLORIDA

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

Email Address: GRABIDEAU@RABIDEAU KLEIN
COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
B SQUARED PROPERTY MANAGEMENT LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

RECEIVED
2024 MAR 27 PM 4:45
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

MAR 28 2024



March 27, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

B SQUARED PROPERTY MANAGEMENT LLC
440 ROYAL PALM WAY STE 101
PALM BEACH, FL 33480US

SUBJECT: B SQUARED PROPERTY MANAGEMENT LLC
REF: L24000120754

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please state the action (add, remove, change) you wish for Luis Aguilera.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H24000114302
Letter Number: 524A00006613

Mar. 27, 2024 3:30 PM

At. 2022 E. 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: B SQUARED PROPERTY MANAGEMENT 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:

GUY RABIDEAU

Name of Person

RABIDEAU KLEIN

Firm/Company

440 ROYAL PALM WAY, SUITE 101

Address

PALM BEACH, FL 33480

City/State and Zip Code

GRABIDEAU@RABIDEAUKLEIN.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GARRETT ELLIS

561 655-6221
at ()

Name of Person

Area Code

Daytime Telephone 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)

☐ \$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

Mar. 27. 2024 3:31PM

No. 2332 P. 4

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

B SQUARED PROPERTY MANAGEMENT LLC

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

FILED
2024 MAR 27 PM 2:09
CLERK OF THE CIRCUIT COURT
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/14/2024 and assigned
Florida document number L24000120754.

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

Mar. 27. 2024 3:31 PM

As. 2032 P. 5

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	RAJ SHRESTHA	440 ROYAL PALM WAY, SUITE 101	<input checked="" type="checkbox"/> Add
-----	--------------	-------------------------------	---

		PALM BEACH, FL 33480	<input type="checkbox"/> Remove
--	--	----------------------	---------------------------------

			<input type="checkbox"/> Change
--	--	--	---------------------------------

MGR	LUIS AGUILERA	440 ROYAL PALM WAY, SUITE 101	<input checked="" type="checkbox"/> Add
-----	---------------	-------------------------------	---

		PALM BEACH, FL 33480	<input type="checkbox"/> Remove
--	--	----------------------	---------------------------------

			<input type="checkbox"/> Change
--	--	--	---------------------------------

			<input type="checkbox"/> Add
--	--	--	------------------------------

			<input type="checkbox"/> Remove
--	--	--	---------------------------------

			<input type="checkbox"/> Change
--	--	--	---------------------------------

			<input type="checkbox"/> Add
--	--	--	------------------------------

			<input type="checkbox"/> Remove
--	--	--	---------------------------------

			<input type="checkbox"/> Change
--	--	--	---------------------------------

			<input type="checkbox"/> Add
--	--	--	------------------------------

			<input type="checkbox"/> Remove
--	--	--	---------------------------------

			<input type="checkbox"/> Change
--	--	--	---------------------------------

			<input type="checkbox"/> Add
--	--	--	------------------------------

			<input type="checkbox"/> Remove
--	--	--	---------------------------------

			<input type="checkbox"/> Change
--	--	--	---------------------------------

FILED
2024 MAR 27 PM 2:09
SEAL
PALM BEACH, FL 33480

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 11-15-2011 BY 60322
UCBAW

FILED
2004 MAR 27 PM 2:09
FBI - TAMPA
RECEIVED
MAR 27 2004

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 MARCH 27 2024

Greg Kohn Sign

GUY RABIDEAU

Filing Fee: \$25.00