

L24000365027

Florida Department of State
Division of Corporations
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To: Division of Corporations
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BV LEESBURG SUB-DSO LLC**

Certificate of Status	0
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FILED
2025 JAN 27 PM 5:26
TALLAHASSEE, FL 32309
DIVISION OF CORPORATIONS

RECEIVED
6:06 PM 12 JAN 2025
DIVISION OF CORPORATIONS
TAX

((H25000030793 3))
**ARTICLES OF AMENDMENT
 TO
 ARTICLES OF ORGANIZATION
 OF**

BV Leesburg Sub-DSO LLC

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

FILED

2025 JAN 27 PM 5:26
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 8/22/2024 and assigned
 Florida document number L24000365027.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

BV Palmetto Sub-DSO LLC

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

City

Florida

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

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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>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input checked="" type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

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