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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RG RIVERLANDS, LLC

Certificate of Status	0	
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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (I-4 must be completed)

Name of limited liability Company as it appears on the records of the Florida Department of	
State: BG Riverlands, LLC	
Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	A 1.00
MOST DE A STACET AVONESS!	100
	Mar
Enter new mailing address, if applicable:  (Mailing address	
MAY BE A POST OFFICE BOX)	
2. The Florida document number of this limited liability company is: M250000 8382	
3. Jurisdiction of its organization: LINASIANA (D)	
4. Date authorized to do business in Florida: June 10, 1025	
SECTION II (5-9 complete only the applicable changes)	
5. New name of the limited liability company: NA	٠.
(must contain "Limited Liability Company, " "L.L.C." or "LLC.")-	<u>ر</u>
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach acropy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")	
6. If amending the registered agent and/or registered officer 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: BG MOSTEY Family, LLC	
New Registered Office Address: 2840 SW 129 AVENUE	
Enter Florida Street Address	
MIAMI 33175  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 the smendm	ent changes person, title or capacity in	accordance with 605.0902 (1)(e), indic	cate that change:
itle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Acrio
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		<u>-</u>	Add
OLOL CUTCHICHOLICC	ertificate, if required: no more than 90 amendment(s), duly authenticated by ler the law of which this entity is organ	the official bassian assess at the	Remove
	Signature of	the authorized representative	

Filing Fee: \$25.00