L16000117760

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(City/State/Zip/Fhorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300288717853 AM D: 51

02/14/17--01006--015

FEB 14 2017



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 14, 2016

ALEXANDER BRUCKSTEIN 2635 NE 188 STREET, SUITE 100 AVENTURA, FL 33180

SUBJECT: BSD 26 LLC Ref. Number: L16000117760 2017 FEB 13 F 4: 02
SECRETARY OF STATE
TALL AHASSEF FLORIDS

We have received your document for BSD 26 LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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

Deborah Bruce Regulatory Specialist II

Letter Number: 916A00019577

2017 FEB 13 AH ID: 01

COVER LETTER

то:	Registration S Division of Co			
SHD IE	CT:	BSD 26 LLC		
SUBJE		Name of Lim	ited Liability Company	
		of Amendment and fee(s) are sub pondence concerning this matter	_	
		ALEXANDER BRUCKS	ΓΕΙΝ	4
			Name of Person	2017 FE SEORE ALLAH,
		**************************************	Firm/Company	FEB 13 F
		2635 NE 188 Street, Suite	100	
		**************************************	Address	SIAN CORIDA
		Aventura, Florida 33180		0 3
		alexbruckstein1@gmail.co	City/State and Zip Code 11 to be used for future annual report notifi	
For furt	her information	n-man address: (concerning this matter, please c	·	cation)
	ANDER BRUC	-	305 213-9263	
	Name	e of Person	at () Area Code Daytime	Telephone Number
Enclose	d 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)
		LING ADDRESS:	STREET/COURIE	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, I²L 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	BSD 26 LLC		
(Name of the Limi	ted Liabitity Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Librida document number L16000117760	iability Company	were filed on JUNE 17, 2016	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name o	of the limited liab	ility company here:	
The new name must be distinguishable and contain the		lity Company," the designation "LLC" of 20201 E. Country Club Drive	or the abbreviation "L.L.C."
Enter new principal offices address, if appli (Principal office address MUST BE A STRE)		Unit #1604	20 H
	2 1 1 2 4 5 4 7 4 4 2 2 C 5 C 7	Aventura, Florida 33180	≩ ∺ = "11
Enter new mailing address, if applicable:		20201 E. Country Club Drive	SSEE
Mailing address MAY BE A POST OFFICE	BOX)	Unit #1604	70 U
		Aventura, Florida 33180	7575 f
B. If amending the registered agent and registered agent and/or the new registered of			enter the name of the new
Name of New Registered Agent:	ALEXANDER		
New Registered Office Address:	2635 NE 188 S	STREET, SUITE #100	
	AVENTURA	Enter Florida street address	33180
	AVENTURA	, Flor	rida 33180 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

Page 1 of 3

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
MGR	BRUCKSTEIN, ANALI	20201 E. Country Club Dr. #1604	
		Aventura, Florida 33180	☐ Remove
		-	■ Change
MGR	BRUCKSTEIN, ALEXANDER	2635 NE 188 Street #100	<u></u> ≣ Add
		Aventura, Florida 33180	□ Remove
		······	Change
· · · · · · · · · · · · · · · · · · ·			□ Add
			20 kemove
	 		Property Control of the Control of t
			Change
** · · · · · · · · · · · · · · · · · ·			□ Add
			Remove
			Change
			Add
			□ Remove
			Change

ARTICLE VI - THE COMPANY IS A	MANAGER-MANAC	GED ENTITY.		
				
				20
			AH	7 ==
			SS SS	
	· uner		10 - C	
			F- 65	,
			RES ROM N	<u> </u>
			- · · · · ·	
ective date, if other than the date of fi	iling:		(optional)	
effective date is listed, the date must be specific te: If the date inserted in this block does n	c and cannot be prior to d	ate of filing or more than 9	0 days after filing.) Pu	rsuant to 605.020 I not be listed a
ument's effective date on the Department			,	
			10.01	Alex 17 1
record specifies a delayed effective. The 90th day after the record is file.		n errective time, at	12:01 a.m. on	the earlier t
a 1 c				
sed 7/6	2016	5		
		ed representative of a men	L	

Page 3 of 3

Filing Fee: \$25.00