

**Florida Department of State**  
**Division of Corporations**  
**Electronic Filing Cover Sheet**

L23 0000 54936

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

From: Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.  
 Account Number : 072720000036  
 Phone : (407)843-4600  
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 Attn: Tami D. Passley

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

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN**  
**BULL STREET ADVISORS, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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2023 MAR -2 PM 3:59

DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS  
 TRACED, ANALYZED, RECORDED, INDEXED

2023 MAR -2 AM 10:05

APPROVED  
 AND  
 FILED

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

Bull Street Advisors, 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 02/03/2023 and assigned Florida document number L23000054936.

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**

2023 APR - 2 AM 10:06  
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OFFICE



