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EXAMINER



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# **COVER LETTER**

TO: Registration Section , Division of Corporations
SUBJECT: Blue Sky Realty 22C  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:
Donna K Gross Name of Person
Donna K Gross Name of Person  Blue SKy Realty of Slo FL, LLC Firm/Company
5211 SKyline Blud
Cape Coral, FL 33914  City/State and Zip Code  day ross 2326 @ AOL.com  E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Donna Gross at 239, 573-1239  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$ Certificate of Status  Certificate of Status  S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)  Certified Copy

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

# ARTICLES OF AMENDMENT

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<ul> <li>ARTICLES OF O</li> </ul>	RGANIZATION // K
Ol	F COSTON COSTON
Blue Sty	RGANIZATION  F  Realty Language Services  Re
(A Florida Limited L	iability Company)
The Articles of Organization for this Limited Liability Company	were filed on 9/20/2004 and assigned
Florida document number <u>6040006982</u> 2	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
Blue Sty Realty of	SWFL, LLC.
Blue SKy Realty of The new name must be distinguishable and end with the words "Limit" L.L.C."	
Enter new principal offices address, if applicable:	Donna K Gross
(Principal office address MUST BE A STREET ADDRESS)	Donna K Gross 5211 Skyling Blvd Cape Coral, FL 33914
Enter new mailing address, if applicable:	-
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered off 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 Zin 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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member <u>Title</u> Name 1 **Address** Type of Action MGRM Tracy-Duyer-Cowan 5211 Skyling Blud Add Cape Coral Fl 33914 Dremove ☐ Remove Add Remove  $\prod Add$ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Change Donnak Gross to MCRM Change Mailing Address zipcode to 33914 Dated <u>Fab</u> 24 ,2011. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00