

118000056400

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

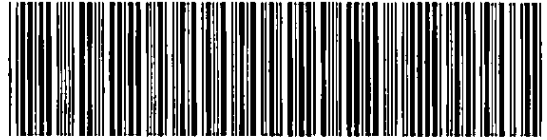
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300319224503

10/16/18--01033--017 **30.00

RECEIVED
OCT 15 2018

FILED
18 OCT 15 AM 10:17
STATE OF ARIZONA

BY SIMMONS
OCT 21 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Blackburn Real Estate Holdings, LLC

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:

E. Bernard Blackburn Jr.

Name of Person

Firm/Company

PO Box 10301

Address

Naples, FL 34101

City/State and Zip Code

emarsbars@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Theresa Knowler

239

333-1031 x115

at (_____)

Name of Person

Area Code

Daytime Telephone Number

Enclosed 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)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Blackburn Real Estate Holdings, 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 03/02/2018 and assigned Florida document number 1.18000056400.

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:

5890 Golden Gate Pkwy.

(Principal office address MUST BE A STREET ADDRESS)

Naples, FL 34116

Enter new mailing address, if applicable:

1200 Goodlette Rd, #10301

(Mailing address MAY BE A POST OFFICE BOX)

Naples, FL 34103

FILED
OCT 15 AM 10:17
19

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:

E. Bernard Blackburn Jr.

New Registered Office Address:

5890 Golden Gate Pkwy.

Enter Florida street address

Naples

City

Florida

34116

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.


E. Bernard Blackburn Jr.
If Changing Registered Agent, Signature of New Registered Agent

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>
MGRM	1031 Reverse Exchange Company LLC	1520 Royal Palm, Sq. Blvd. #320 Fort Myers, FL 33919	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	E. Bernard Blackburn Jr.	1200 Goodlette Rd. #10301 Naples, FL 34103	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

18
OCT
10
AM
10:10

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

FILED
19 OCT 15 AM 10:17
STATE

E. Effective date, if other than the date of filing: 9/10/2018 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated September 10 2018

Theresa Knowler
Signature of a member or authorized representative of a member

Theresa Knowler, Manager of 1031 Reverse Exchange
Typed or printed name of signee company, LLC