P05000090430

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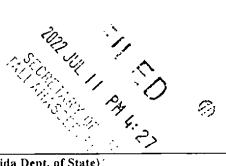
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: BLUE SKY TITLE	E SERVICES, INC.						
DOCUMENT NUM	P05000090430							
The enclosed Article	The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all cor	respondence concerning this ma	tter to the following:						
	LUCAS TELLEFSEN							
		Name of Contact Persor	1					
	BLUE SKY TITLE SERVICES INC.							
		Firm/ Company						
	668 Willow Bend Road							
		Address						
	Weston, FL 33327							
		City/ State and Zip Code						
	BLUESKYTITLE3@HOTM	AIL.COM						
	E-mail address: (to be us	sed for future annual report	notification)					
For further informat	ion concerning this matter, pleas	se call:						
LUCAS TELLEFS	EN	954 at (732-8741					
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number					
Enclosed is a check	for the following amount made	payable to the Florida Depa	irtment of State:					
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section In of Corporations Entre of Tallahassee N. Monroe Street, Suite 810					

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



BLUE SKY TITLE SERVICES INC.

(Name o	f Corporation as current	y filed with the Flori	da Dept. of State)
P05000090430			
	(Document Number o	f Corporation (if know	vn)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corpor	ration adopts the following amendment(s) to
A. If amending name, enter the new na	ime of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	$Corp.$ " "Inc," or "Co". \sim	4 professional corpor	orated" or the abbreviation "Corp" vation name must contain the word
B. Enter new principal office address,	if applicable:	<u></u>	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
C. Enter new mailing address, if appli			
(Mailing address <u>MAY BE A POST</u>)	OFFICE BOX)		
D. If amending the registered agent an new registered agent and/or the new			the name of the
	LUCAS TELLEFSEN		
Name of New Registered Agent			
			
	668 Willow Bend Road, V	reet address)	33327
New Registered Office Address:	- 1008 WIIIOW Della Roau, V	(City)	, Florida
		(City)	vay code)
New Registered Agent's Signature, if c	hanging Registered Agent	l :	
I hereby accept the appointment as regist	ered agent. I am familiar	with and accept the ob	oligations of the position.
)m c	2//	
 	Signature of New F	Registered Agent, if ch	anging

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	CYNTHIA TELLEFSEN	13800 NW 14th Street, Ste 190
Add		-	Sunrise, FL 33323
X Remove			
2) Change	P	LUCAS TELLEFSEN	668 Willow Bend Road
X Add			Weston, FL 33327
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

Attach additional sheets, if necessar	l Articles, enter change(s) here: ary). (Be specific)
_	4//
	Δ / Δ
	/ \ / / \
<u> </u>	
	
f an amendment provides for an	exchange, reclassification, or cancellation of issued shares,
provisions for implementing the (if not applicable, indicate N/.	e amendment if not contained in the amendment itself:
(ij ma iqqmetine; maetae im	•••
	/ V / 77
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The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareho	lder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the ame sufficient for approval.	ndment(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	g statement !(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
CYNTHIA TELLE		
by	(voting group)	
sele	director, president or other officer – if directors or officers have noted, by an incorporator – if in the hands of a receiver, trustee, or opinted fiduciary by that fiduciary)	
	CYNTHIA TELLEFSEN	
	(Typed or printed name of person signing)	
	p	
	(Title of person signing)	