Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name : SANCHEZ AND SANCHEZ CORP

Account Number : I20190000017

Phone : (305)362-8750 Fax Number : (305)362-8750

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PEPAROTENT OF STATE WISION OF STATE

COR AMND/RESTATE/CORRECT OR O/D RESIGN BLUEGREEN BAY CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

COVER LETTER

TO: Amendment Section Division of Corpora	itions		
NAME OF CORPORA	TION: BLUEGREEN BAY	CORP	
DOCUMENT NUMBE	P08000095858		
	Amendment and fee are subr		
	ondence concerning this matter		
<u>I</u>	UIS LIVAN LACHE SOTO	Name of Contact Person	
-			
-		Firm/ Company	
	3211 SW 35th TERR		
-		Address	<u> </u>
!	MIAMI, PL 33155		
		City/ State and Zip Code	
	LIVANIVON@GMAIL.COM	ſ	
•	E-mail address: (to be use	ed for future annual report i	notification)
	n concerning this matter, pleas		9532727
LUIS LIVAN LACHE	of Contact Person	at (at Coo	9532727 le & Daytime Telephone Number
	r the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S\$2.50 Filing Fce Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tullahassee, FL 32314		Amond Division The C 2415	Address diment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 cassee, FL 32303

Articles of Amendment to Articles of Incorporation

LED

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BLUEGREEN BAY CORP		ENGLY OF STATE
(Name of Corporation as current	tly filed with the Florida Dep	n. of State) S. T.E. FL
P08000095858		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation a	dopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A projessional corporation i	" or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office address.	idress in Florida, enter the n	
Name of New Registered Agent		
(Florida	street address)	 _
		. Florida
New Registered Office Address:	(Clty)	(Zip Code)
New Registered Agent's Signature, If changing Registered Age I hereby accept the appointment as registered agent. I am familia	ar with and accept the obligati	
Signature of Net	w Registered Agent, If changin	_
Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (i 1) (e), F.S.	7311163)

(Hz3000Z311163)

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)

Example:

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 Sully Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1)Change	VP	LUIS LIVAN LACHE SOTO	8211 SW 35th TERR
Add			MIAMI, FL 33155
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Clunge			
Add			
Remove			 -

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If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
It an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
arayleiane for implementing the apid	andment if not contained in the amendment itself;
(if not applicable, indicate N/A)	
.uis Livan Lache soto 0 sh	ARES

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•	06/29/2023		, if other than the
The date of each amendment(s) addition this document was signed.	option:		
Effective date <u>if applicable</u> :	(no more than 90 days after a	mendment file date)	<u></u>
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory partment of State's records.	y filing requirements, this date will	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of direc	ctors without shareholder action and	i shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of verificient for approval.	votes cast for the amendment(s)	
must be separately provided for	roved by the shareholders through voting (each voting group entitled to vote separate	ery on the different content	
'The number of votes cast	for the amendment(s) was/were sufficient	for approval	•
by	(voting group)	·"	7023
06/29/2023 Dated		· :	130 P
selecti	lirector, president or other officer – if directed, by an incorporator – if in the hands of a steel fiduciary by that fiduciary)	ctors or officers have not been a receiver, trustee, or other court	AMIII: 43
	LUIS LIVAN LACHE SOTO		
	(Typed or printed name of per	rson signing)	
	VP		
	Critic of person signing)		

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