Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : ALVAREZ, SUAZO & ASSOCIATES Account Number : I20130000076 : (305)388-7028 Phone : (305)479-2705 Fax Number **Enter the email address for this business entity to be used for fugure annual report mailings. Enter only one email address please. ** Email Address: LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BLUE & GOLD ENTERPRISES, LLC Certificate of Status 0 Certified Copy 0 Page Count 03 Estimated Charge \$25.00

Electronic Filing Menu

Corporate Filing Menu

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OCT 1 8 2016

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A.3.

1.30.

4.00

BL	ue & gold enterprises, llc		
(Name of the Limit	ed Liability Company as it now appear (A Florida Limited Liability Company)	on our records.)	
he Articles of Organization for this Limited Li	ability Company were filed on	08/21/2012	and assigned
lorida document numberL12000107773	·		
his amendment is submitted to amend the folk	owing:		
. If amending name, enter the new name of	the limited liability company he	ere:	
I/A			
ne new name must be distinguishable and contain the w	ords "Limited Liability Company," the	losignation "LLC" or the	abbreviation "L.L.C."
-	• • •		
nter new principal offices address, if applic	able:		
Principal office address MUST BE A STREE	TADDRESS)	·	5 8
			3
nter new mailing address, if applicable:	<u> </u>		S
Mailing address MAY BE A POST OFFICE	BOX)		ma 🤛 🖂
			For the first
		·· <u>·····</u>	22 GJ
If amending the registered agent and			
egistered agent and/or the new registered of	or registered brice address of Tica address bere:	our records, ent	er the name of the r
Asteres agent and of the new registered of	nce address note.		
	N/A		
Name of New Registered Agent:	JV/A		
New Registered Office Address:			
TOW THE PROPERTY OF THE PROPERTY.	Enter Flo	rida 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

12

. ,

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGRM	CARLOS A PANEULI	500 BAYVIEW DRIVE # 220	
		SUNNY ISLES BEACH, FL	Remove
		33160	☐ Change
MGRM	DANIEL W MARTINET	500 BAYVIEW DRIVE # 220	
		SUNNY ISLES BEACH, FL	Remove
•		33160	☐ Change
MGR	CLAUDIO A MINONES	500 BAYVIEW DRIVE # 220	Add
		SUNNY ISLES BEACH, FL	□ Remove
		33160	Change
			D Add
			Remove Change
			Change Add
			□ Remove
			Change

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