FZ0 000005313

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| | | | | |
| (Address) | | | | |
| | | | | |
| (Address) | | | | |
| (/1001033) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
| | | | | |
| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| , , | | | | |
| (Decument Number) | | | | |
| (Document Number) | | | | |
| \checkmark | | | | |
| Certified Copies Certificates of Status | | | | |
| 1.30.21 | | | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| <u> </u> | | | | |

Office Use Only



900356209639

12/21/20--01018--013 **52.50

Hound

FEB 20 2021 ! ALBRITTON

COVER LETTER

| | ent Section Division of Corporation VEST MANAGEMENT INCORI | | ire Realty Company) |
|------------------------|--|---------------------------------------|--|
| SUBJECT: | | of Corporation | |
| DOCUMENT NU | MBER: | | |
| The enclosed Ame | ndment and fee are submitted for | filing. | |
| Please return all co | orrespondence concerning this ma | tter to the following: | |
| Andrey Sokurec | | | |
| | Name of Contact Person | | |
| MIDWEST MAN | AGEMENT INCORPORATED | | |
| | Firm/Company | | |
| 4820 Minnetonka | Blvd. # 303 | | • . |
| | Address | | |
| Minneapolis, MN | 55416 | | |
| 1-1-1-1 | City/State and Zip Code | | |
| asokurec@gmail.c | om | | |
| E-mail addre | ess: (to be used for future annual r | eport notification) | |
| For further inform | ation concerning this matter, pleas | se call: | |
| Andrey Sokurec | | 612 325-0542 | |
| Name of Contact Person | | Area Code & Daytime | Telephone Number |
| Enclosed is a chec | k for the following amount: | | |
|]\$35 Filing Fee | ☐ \$43.75 Filing Fee & Certificate of Status | ☐ \$43.75 Filing Fee & Certified Copy | \$52.50 Filing Fee, Certificate of Status & Certified Copy |

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



2021 FE 1, FT 1: CL

Division of Corporations

February 3, 2021

ANDREY SOKUREC 4820 MINNETONKA BLVD #303 MINNEAPOLIS, MN 55416

SUBJECT: BLUE SQUARE REALTY COMPANY

Ref. Number: F20000005313

We have received your document for BLUE SQUARE REALTY COMPANY and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to check which action to take with ROBERTO M. RODRIGUEZ.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 421A00002509

2/10/2021

Please see activated drawness with D Add for Roberto in Rodriguez.

Thanks.

AS.

www.sunbiz.org

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F20000005313 (Document number of corporation (if known) MIDWEST MANAGEMENT INCORPORATED dba in Florida as BLUE SQUARE REALTY COMPANY (Name of corporation as it appears on the records of the Department of State) **MINNESOTA** 11/23/2020 (Incorporated under laws of) (Date authorized to do business in Florida) SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES) 4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? (Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 6. If the amendment changes the period of duration, indicate new period of duration. (New duration) 7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction. (New jurisdiction) 8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (Zip Code) New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

| Title/ Capacity | <u>Name</u> | Address | Type of Action |
|---|---|---|---|
| Director | Roberto M. Rodriguez | 11916 Davenport Ct. NE, Blaine, MN 5544 | 9 ZAdd |
| | | | Remove |
| Manager | Joseph Gnapp | 17910 Clear Lake Drive, Lutz FL 33548 | □Add |
| | | | ERemove |
| | · | | QAdd |
| | | | CRemove |
| | | | DAdd |
| | | | CRemove |
| | | | □Add |
| | | | CRemove |
| 0. Attached is a of the applica under the lav | certificate or document of similar import, e ation to the Department of State, by the Secret was of which it is incorporated. | videncing the amendment, authenticated not a ary of State or other official having custody of | more than 90 days prior to delivery corporate records in the jurisdiction |
| | Signature of a direct | for president or other officer - if in the hands | of |
| | And rey So Kurec | tor, president or other officer - if in the hands ourt appointed fiduciary, by that fiduciary) | |
| | (Typed or printed name of person signing) | (Title of nerso | |

FILING FEE \$35.00