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COVER LETTER

TO: Registration Division of	n Section Corporations			
SUBJECT: BLUE	EPRINT ENTEPRIS	ES, LLC		
	(Name o	of Limited Liability Co	mpany)	
Dear Sir or Madam:				
The enclosed Article	s of Correction and fee(s) a	are submitted for filing.		
Please return all corr	espondence concerning this	s matter to the followin	g:	
JERALD R. PI	TKIN, ESQ.			
	(Name of Person)		_	
PAULICH, SLAC	K & WOLFF, P.A.			
	(Firm/Company)		_	
5147 CASTELLO	D DRIVE			
	(Address)		_	
NAPLES, FL 34	103			
	(City/State and Zip Code)		-	
For further informati	on concerning this matter, p	please call:		
JERALD R. PITKI	IN. ESQ.	at (239	261-0544	
	nme of Person)	(Area Code &	2 Daytime Telephone Number)	_
STREET/COURIES Registration Section Division of Corporat Clifton Building 2661 Executive Cent Callahassee, Florida	ions er Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
	_	_	Dezo pilina par	
2 \$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐\$60 Filing Fee, Certificate of Status & Certified Copy	

CR2E062 (08/05)

TO:

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST BLUEPR	The name of the limited liability company is:				
<u>SECO</u>	ND: The articles of organization or the application to transact business				
(CH	IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE ST	<u>ATEMEI</u>	<u>NT</u>		
7	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: ARTICLE I - The name of the Limited Liability Company is: NAME WAS SPELLED !NCORRECTLY				
	BLUEPRINT ENTERPRISES, LLC				
	<u>OR</u>				
	Was defectively signed. The manner in which the document was defectively the appropriate correction are as follows:	signed a	and		
		SECRE	06 0C		
		TAGE) ASSI	2		
Dated:	Signature of a member or authorized representative of a member	COF STATE	PH 1: 58		
	JERALD R. PITKIN, ESQ.				
	Typed or printed name of signee				
	Filing Fee: \$25.00				

Certified Copy:

\$30.00 (optional)

Electronic Articles of Organization For Florida Limited Liability Company

L06000102644 FILED 8:00 AM October 20, 2006 Sec. Of State dbruce

Article I

The name of the Limited Liability Company is: BLUEPRINT ENTEPRISES, LLC

Article II

The street address of the principal office of the Limited Liability Company is: 7017 LEOPARDI COURT NAPLES, FL. 34114

The mailing address of the Limited Liability Company is:

7017 LEOPARDI COURT NAPLES, FL. 34114

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

CORPORATE REGISTERED AGENT, LLC 5147 CASTELLO DRIVE NAPLES, FL. 34103

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: CASEY WOLFF, AS ITS MEMBER

Article V

The name and address of managing members/managers are:

Title: MGRM PAUL R NEWMAN 7017 LEOPARDI COURT NAPLES, FL. 34114

Title: MGRM CLAIRE NEWMAN 7017 LEOPARDI COURT NAPLES, FL. 34114

Article VI

The effective date for this Limited Liability Company shall be: 10/20/2006

Signature of member or an authorized representative of a member Signature: JERALD R. PITKIN, ESQ.

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