## L06000118351

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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SECRETARY OF STATES
SECRET

J. SAULSBERRY EXAMINER JAN 24 2011

## **COVER LETTER**

TO:/\* Registration Section

Division of Co	rporations				
SUBJECT:	Stein Comme	rcial Brokerage, LLC	;		
		ited Liability Company			
		•			
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Hayden P. Ridore		_	
		Name of Person			
Blueprint Capital, LLC		_			
		Firm/Company			
	20	08 East Colonial Drive		_	
		Address		<del>-</del>	
		Orlando, FL 32801		2011 JAN 21	gardy to
	Hri	City/State and Zip Code dore@invictuslaw.com		EN EN	- 100-200
	E-mail address: (	to be used for future annual report r	notification)	1137	i.
For further information	concerning this matter, please of	eall:		PM I:	y. T Sign
<del></del>	den P. Ridore	at ( 407 )	478-0063	<u> 5</u> ₩ ≌	
Name	of Person	Area Code & Day	ytime Telephone Numbo	er -	
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	osed) Certifie	ate of Status &	losed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COU Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	rporations g c Center Circle		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stein Commercial	l Brokerage, l	LC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appear Liability Company)	s on our records.)			
The Articles of Organization for this Limited Liability Company	were filed on	12/12/2006	and assigned		
Florida document number L06000118351					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :			
BLUEPRINT CA	APITAL, LLC				
The new name must be distinguishable and end with the words "Limi" L.L.C."	ited Liability Compa	ny," the designation	"LLC" or the abbreviation		
Enter new principal offices address, if applicable:	208 East Cole	onial Drive			
(Principal office address MUST BE A STREET ADDRESS)	(UST BE A STREET ADDRESS) Orlando, Florida 32801				
Enter new mailing address, if applicable:	P.O. BOX 220	09	JAN 21		
(Mailing address MAY BE A POST OFFICE BOX)	Orlando, Flor	ida 32802			
		<u> </u>	- S - S - S - S - S - S - S - S - S - S		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ur records, <u>enter</u>	the name of the new		
Nome of New Designand Assets					
Name of New Registered Agent:					
New Registered Office Address:		Elected street	11		
Enter Florida street address					
	City	, Florida _	Zip Code		
	,		2.12 2000		

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 608, 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 amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member						
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action			
			Add Remove			
,						
			Add Remove			
			_			
	-		Add Remove			
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		FLOR 10 A	Add			
D. If amer	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	_			
_			_			
_			_			
_			_			
<u></u>			_			
Dated	oneany 18	2011				
V	Signature of a r	member or authorized representative of a member				
	~	Hayden P. Ridore				
		Typed or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00