L07000001443

(Re	questor's Name)	
(Ad	dress)	
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(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
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(Bu	isiness Entity Nam	ie)
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

T. HAMPTON

JUN - 6 2008

EXAMINER

COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT: 2 for Lu	nch. LLC			E 1
SUBJECT 19		ited Liability Company)		M
•				
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Marco lannella			
		(Name of Person)		
		(Firm/Company)		
	2212 Donato Dr.			
	- 12 PM - 12 P	(Address)	7.13.14.17	<i>.</i> *
	Belleair Beach, FL 33786	3		
		(City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	
For further information co	oncerning this matter, please c	all:		
Marco lannella		at (727) 230-4750		
(Name o	of Person)	(Area Code & Daytime T	elephone Number)	•
Enclosed is a check for th	e following amount:			
□ \$25.00 Filing Fee	☑\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee Certificate of St Certified Copy (additional copy	atus &

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTI	CLES OF U	RGANIZATION	長四夏 卫
•	O	F	ASSE ASSE
			riica III
2 for Lunch, LLC			D PM 1: 40
(Name of the Limited	Liability Compa	ny as it now appears on our records.) Liability Company)	CR.
(**	Tiorida Dillito	submity Company)	A O
The Articles of Organization for this Limited Li	iability Company	were filed on 01/04/2007	and assigned
Florida document number L07000001443			
This amendment is submitted to amend the follo	owina.		
This amendment is submitted to amend the folic	JWIIIG.		
A. If amending name, enter the new name of	<u>f the limited liab</u>	ility company here:	
Blu Sol Creative Marketing LLC			
The new name must be distinguishable and end wit "L.L.C."	h the words "Lim	ited Liability Company," the designation	1 "LLC" or the abbreviation
Enter new principal offices address, if applications	able:	2212 Donato Dr.	
(Principal office address MUST BE A STREET ADDRESS)		Belleair Beach, FL 33786	
Enter new mailing address, if applicable:		2840 West Bay Dr. #339	
(Mailing address MAY BE A POST OFFICE BOX)		Belleair Bluffs, FL 33770	
,			· ·
B. If amending the registered agent and/o	or registered of	ffice address on our records, ente	r the name of the new
registered agent and/or the new registered of	fice address her	<u>'e</u> :	
Name of New Registered Agent:	.		
New Registered Office Address:	2212 Donato	Dr.	
New Registered Office Address:		(Enter Florida street	address)
	D-H1- D1	·	•
	Belleair Beach	, Florida	33/00

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.

(City)

(Zip Code)

'If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = N MGRM =	Manager = Managing Member		
<u>Title</u> .	<u>Name</u>	Address	Type of Action
			_ _ Add
			Remove
			Add
			Remove
			Add Remove
			 □ Add
			Remove
			Add Remove
			Add
D. If amo	ending any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	_
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-		LATASSEE	<u>- </u>
-		FLORID	를 모르는 C
Dated	JUNE ZND	7008	0 4 0
	Mul	Welle-	
	Signature of a	member or authorized representative of a member	<u> </u>
	Marco lannella	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00