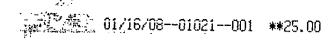
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Office Use Only



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08 JAN 16 PM 1:31

COVER LETTER

TO: Registration Sect Division of Corpo	
SUBJECT:	Blow Group LLC (Name of Limited Liability Company)
The enclosed Articles of A	mendment and fee(s) are submitted for filing.
Please return all correspond	dence concerning this matter to the following:
	Jovianna Gonzalez (Name of Person)
	(Firm/Company)
	1565 NURHAWDY DRIVE
	1565 NORMANI) V DRIVE (Address) Miami Black, Fl. 3314/ (City/State and Zip Code)
0	cerning this matter, please call:
OVIANA (Name of	Person) at (305) 962-6218 (Area Code & Daytime Telephone Number)
Enclosed is a check for the	following amount:
\$25.00 Filing Fee [\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, 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

ARTICLES OF ORGANIZATION
OF

BLUW GROUP, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/09/08 and assigned

Florida document number L0800003956.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.C."

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

(Enter Florida street address)

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)

(If Changing Registered Agent, Signature of New Registered Agent)

(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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRT Vice Presi	1 ARTURO B. Lievano	1565 NURMANDY DRIVE MIAMI BEACH, FL 33141	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If ame	ending any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
- - - Dated(_ Torana	or authorized representative of a member	SECRETARY OF STATE DIVISION OF CORPORATIONS 08 JAN 16 PM 1:31

Page 2 of 2

Filing Fee: \$25.00