208000064/17

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
,50	Sinces Entity Hai	'
(Da	arrana Mirrahaa	<u>.</u>
(00	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	ur	
	MAY 3 0	t t
	A. LUI	VT

Office Use Only



600248124346

FALLAHASSEE, FEORIO

4 班回 58

05/24/13-01013-022 **25.00

COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT:	Bluwice Oplando Name of Limit	LLC ed Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Maur	Name of Person		
	B	Firm/Company	2	
	9699	Ravella Lane Address	2013 MAY 24 MA IO 54 SECRETARY OF STATE ALLIAHASSEELFEORE	****
	Palm Beach	Gardens, FL 33410 City/State and Zin Code	24 MIN OF STATE ASSEELF LOADS	F
	E-mail address: (to	O & bluwire 1. com be used for future annual report notification		*.
For further information co	oncerning this matter, please ca	11:	منة	
Maurico C Name of	terson	at (56) 200 900 Area Code & Daytime Tele	phone Number	
Enclosed is a check for th	ne 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 Status & 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



Bluwise Orla	NO LLC		Files
(Name of the Limited Liability Compan (A Florida Limited Lia	y as it now appear ability Company)	rs on our records.)	<u> </u>
The Articles of Organization for this Limited Liability Company v Florida document numberLOSOOO 64 !! 7			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company hei	<u>·e</u> :	
Bluwire Atlanta LLC	-		
The new name must be distinguishable and end with the words "Limite" L.L.C."	ed Liability Compa	any," the designation "	'LLC" or the abbreviation
Enter new principal offices address, if applicable:	9699	Ravella La	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	Palm A	Seach Gardens	, FL 33410
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	aloga bln be	Ravella Lang	FL 33410
B. If amending the registered agent and/or registered office address here		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street ad	dress
		, Florida	
	City		Zip Code

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 Changing Registered Agent, Signature of New Registered Agent

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

MGR = Ma MGRM = N	nager Nanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	····		Add
			Remove
			Add
		·	
			Remove
			Add Add
			Remove
			Add
			Remove
			Add
			Remove
		 .	Add
			Remove

n ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
-	
-	
_	
- d	5-2-13.
	milm
	Signature of a member or authorized representative of a member
	Mauricio Ojeda
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00