

LO9000044010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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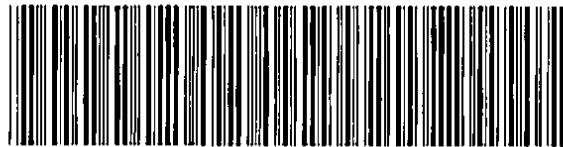
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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COVER LETTER

Registration Section
Division of Corporations

SUBJECT: The Blade Guy, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cory Michael Harweger
Name of Person

Firm/Company

2683 Palmer ave SE
Address

Palm Bay, Florida, 32909
City/State and Zip Code

Cory@rccabinets.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cory Harweger at (321) 978-8680
Name of Person Area Code Daytime Telephone Number

The enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

THE BLADE GUY, 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 02/26/2024 and assigned Florida document number L08000084010.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS

2683 Palmer ave SE

Palm Bay, Florida, 32909

Enter new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX

2683 Palmer ave SE

Palm Bay, Florida, 32909

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:

Cory Michael Harweger

New Registered Office Address:

2683 Palmer ave SE

Enter Florida street address

Palm Bay


City

Florida 32909

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 605, 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

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
removed from our records:

GR = Manager

ABR = Authorized Member

<u>le</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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1GR	Peter M. Colombo	7875 Northern Oak Street	<input type="checkbox"/> Add
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		West Melbourne, FL, 32904	<input checked="" type="checkbox"/> Remove
--	--	---------------------------	--

			<input type="checkbox"/> Change
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1GR	Cory M. Harweger	2683 Palmer Ave SE	<input checked="" type="checkbox"/> Add
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		Palm Bay, FL, 32909	<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Effective date, if other than the date of filing: _____ (optional)

If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated November 4, 2024



Signature of a member or authorized representative of a member

PETER M. COLONBO

Typed or printed name of signee