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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration S Division of Co				
SUBJECT: Blue	hne Proporty (Name of Lim	MANAGEMENT UC.	·	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
·	Kenth H. G	Ause or Michael (Name of Person)	Sondurelis	
	9506 HARRIET	(Firm/Company)	2008 DEC SECRE	_
	9506 HADRIET	(Address)	EC 16	
	Jacksonville F	City/State and Zip Code)	2008 DEC 16 PM 1: 4 SECRETARY OF STATI TALLAHASSEE, FLORII	-
For further information of	concerning this matter, please c	all:	IDA FE	
Kenth (Name	GAMES of Person)	at (<u>964</u>) <u>513</u> 6552 (Area Code & Daytime T	Felephone Number)	
Enclosed is a check for t	he following amount:			
. /	\$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	

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blue line paroperty M	suagement uc	
(Name of the Limited Liabilit	ty Company as it now appears on our Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability Florida document numberLosoo loo950	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
Landwise Lawn and Propert The new name must be distinguishable and end with the wo "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD)		designation "LLC" or the abbreviation
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		TI: L
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent: New Registered Office Address:	iress here:	ords, enter the name of the new
	(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)

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member <u>Title</u> Name **Address Type of Action** 🗖 Add emove Add Remove Remove Remove 🗖 Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 12/10/01 Signature of a member or authorized representative of a member Kerni Gaust
Typed or printed name of signee

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00