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SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

T. CLINE

MAR 3 0 2010

EXAMINER

COVER LETTER

O: Registration S Division of Go				
SUBJECT:	BLUESTREAM	ENERGY LLC		
		ted Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	condence concerning this matter	to the following:		
		Name of Person		
	Blue	stream Energy LLC		
		. mill company		
	/00/	E. Camino Real, #50	27	
	Воса	Raton, FL 33432 City/State and Zip Code		
		City/State and Zip Code	2010 SEI TAL	e united Pilles
	E-mail address; (t	1Zemanian@hotmail. Com o be used for future annual report notification		M:MTM2
For further information	concerning this matter, please co		29 FARY CASSEE	
Lewis Name	Zemanian of Person	at (56/) 504-7957 Area Code & Daytime Tel	2010 MAR 29 AM 11: 02 SECRETARY OF STATE TALLAHASSEE, FLORIDA Number	
			Ori N	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

Bluestream	Energy, LLC	:			
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	y as it now appears iability Company)	on our record	<u>s.</u>)	-	
The Articles of Organization for this Limited Liability Company	were filed on	1arch 2, 2	2009 and	assigne	d
Florida document number		•			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabi	lity company here:	}			
The new name must be distinguishable and end with the words "Limit" L.L.C."	ted Liability Company	y," the designat	tion "LLC" or t	he abbre	viation
Enter new principal offices address, if applicable:				2	
(Principal office address MUST BE A STREET ADDRESS)		· · · · · · · · · · · · · · · · · · ·		MH 011	
				AR 2	
Enter new mailing address, if applicable:	1001 E.	Camino 1	SEE O	9	
(Mailing address MAY BE A POST OFFICE BOX)	Boca Rat	on, FL	33432	==	September 1
	1001 E. Boca Rat		RIDA	02	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		r records, <u>e</u>	iter the nam	e of th	<u>e new</u>
Name of New Registered Agent:		· . · · · · · · · · · · · · · · · · · ·			
New Registered Office Address:	Futo	r Florida stree	ot address	.,,, .,,	
	Eme				
	City	, Florid	zip C	ode	

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 → M MGRM =	anager . Managing Member	·	
<u>Title</u>	<u>Name</u>	Address	Type of Action
			— — — — — — — — — — — — — — — — — — —
			□ Pamova
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			ARY Add Remove
-111	·		AddRemove
D. If amer	nding any other information, enter	change(s) here: (Attach additional sheets, i	f necessary.)
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Dated	March 25,	20/0	
	Signature of a r	nember or authorized representative of a member	er
		Lewis Zemanian Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00