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From:

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Account Number : I20040000146

Phone

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Email	Address:	phillip.glbbs@fowlerwhite.com	

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T. HAMPTON

Helm 2 5 2011

EXAMINER

SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

11 JAN 24 AM 8: 27

BLUE V	VATER TERMINALS,	LLC	_	
(Name of the Limited Li	ability Company as It now apper orida Limited Liability Company)	ars on our records.)		
The Articles of Organization for this Limited Liab Florida document number L090000403	· · · —	APRIL 27, 2009	and assigned	
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of th	e limited liability company ho	ere:		
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Comp	omy," the designation "LL	C" or the abbreviation	
Enter new principal offices address, if applicable	le:	<u></u>		
(Principal office address MUST BE A STREET)	ADDRESS)			
,		<u></u>		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE RO	<u></u>		·	
				
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the	name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
-	City	, Florida	Zip Code	
	City		Lip Coae	

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

MGR = Manager MGRM = Managing Member

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	CAMERON SYMONETTE	5367 ORTEGA BLVD. SUITE 100 JACKSONVILLE EL 32210	Add Remove
			Add Remove
	·		Add Remove
<i>,</i> 			Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	oivis 1
			CRETARY ION OF CO
 Dated			STAT ORAT 8: 2
_	Signatura of a materia	Total Control of the	SNOI
_	J. P	r authorised representative of a member PHILLIP GIBBS r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00