

L10 000011533

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

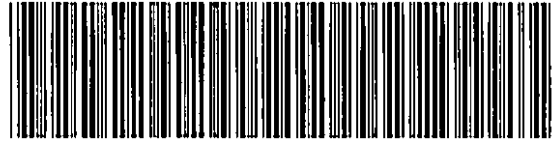
(Business Entity Name)

(Document Number)

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2020 OCT 20 PM 3:18

SECRETARY OF STATE
TALLAHASSEE, FL

11/28/20

On

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Bluwire Group, 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:

David Mau

Name of Person

Bluwire Group, LLC

Firm/Company

515 E. Grant Street, Suite 150

Address

Phoenix, AZ 85004

City/State and Zip Code

dmau@belmontacquisitions.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Mau

602

688-9349

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

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)

☐ \$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

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

2020 OCT 20 PM 3: 18

Bluwire Group, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 02/01/2010 and assigned
Florida document number L10000011533

This amendment is submitted to amend the following:

A. 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)

515 E. Grant Street

Suite 150

Phoenix, AZ 85004

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

515 E. Grant Street

Suite 150

Phoenix, AZ 85004

B. 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:

Richard D. Seay

New Registered Office Address:

533 Northeast 3rd Ave. Ground Floor, Suite 2

Enter Florida street address

Fort Lauderdale

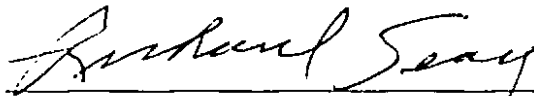
Florida 33301

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 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

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	12 ReTech Corporation	515 E. Grant Street	<input checked="" type="checkbox"/> Add
		Suite 150	<input type="checkbox"/> Remove
		Phoenix, AZ 85004	<input type="checkbox"/> Change
MGR	David Mau	515 E. Grant Street	<input checked="" type="checkbox"/> Add
		Suite 150	<input type="checkbox"/> Remove
		Phoenix, AZ 85004	<input type="checkbox"/> Change
AMBR	Mauricio Ojeda	2622 Ravella Lane	<input type="checkbox"/> Add
		Palm Beach Gardens, FL 33410	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Chris Burden	12084 Edgewater Drive N	<input type="checkbox"/> Add
		Palm Beach Gardens, FL 33410	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(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)

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.

Sand Man
Signature of a member or authorized representative of a member

David Mau

Typed or printed name of signee

Filing Fee: \$25.00