L10000048052

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	the (Charles III)	(2)
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

Division of Co	rporations				
Blue Nile I	ndustries LLC	*			
SUBJECT:					
	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	•		
Please return all correspo	ondence concerning this matter	to the following:			
	Adam Tappin				
		Name of Person			
	Blue Nile Industries LLC				
		Firm/Company			
	150 E Palmetto Park Rd St	uite 800			
		Address			
	Boca Raton, FL 33432				
	adamtappin@yahoo.com	City/State and Zip Code			
		to be used for future annual report notifi	ication)		
For further information of	concerning this matter, please c	•	-		
Adam Tappin	oncerning tha matter, preuse e	561 9078999		202	
		at () Area Code Daytime		2 1%	
Name o	of Person	Area Code Daytime	Telephone Number	2022 JAN 13	
Enclosed is a check for the	he following amount:				ه د و العروب العروب
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	ng Fee. $\overline{\omega}$	

TO:

Registration Section

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

Blue Nile Industries 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 Florida document number L10000048052 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address

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 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> AMBR	<u>Name</u> Glavidia J. Alexis	Address 150 E Palmetto Park Rd, Boca Raton, FL 33432	Type of Action
			□Add
		,	= Remove
AMBR	Adam Tappin		□Change
		150 E Paimetto Park Rd, Boca Raton, FL 33432	= Add
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ffective date, if other than t an effective date is listed, the date is lote: If the date inserted in this ocument's effective date on the	s block does not meet the ap	blicable statutory filin	(option) ore than 90 days after fil g requirements, this d	al) ing.) Pursuant to 605.020 ate will not be listed a
record specifies a delayed effectis filed.	ctive date, but not an effective	e time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
January 12	2022			
nted	//// · —	·		
	Signature of a member or a			