(Req	uestor's Name)	
(Add	lress)	
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(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	ument Number))
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COVER LETTER

SUBJECT:	Bluwire Nev	wark, LLC		
SUBJECT.		Name of Lim	ited Liability Company	
The enclosed	l Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		David Mau		
			Name of Person	
		Bluwire Newark, LLC		
			Firm/Company	
		515 E. Grant Street, Suite	150	
			Address	
		Phoenix, AZ 85004		
		dmau@belmontacquisitions	City/State and Zip Code	
		E-mail address: (to be used for future annual report notific	ation)
For further in	nformation co	ncerning this matter, please ca	all:	
David Mau			602 688-9349	
	Name of	Person		Telephone Number
Enclosed is a	check for th	e following amount:		
□ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)

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

Registration Section Division of Corporations

TO:

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**

FILED

2020 OCT 20 PM 2: 42

Bluwire Newark, LLC

The Articles of Organization for this Limited L	iability Company	were filed on 05/11/2010	and assigned	
Florida document number L10000050448				
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:		
The new name must be distinguishable and contain the v	vords "Limited Liabil	ity Company," the designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if applic		515 E. Grant Street	or are assort lands. B.M.o.	
(Principal office address MUST BE A STREET ADDRESS)		Suite 150		
Trincipal office dualess Mest BEA STREET ADDRESS		Phoenix, AZ 85004		
Enter new mailing address, if applicable:	er new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		MAY BE A POST OFFICE BOX) Suite 150	Suite 150	
		Phoenix, AZ 85004		
B. If amending the registered agent and/or agent and/or the new registered office addre		address on our records, <u>enter t</u>	he name of the new registered	
Name of New Registered Agent:	Richard D. Sea	у	. , 	
New Registered Office Address:	533 Northeast	Brd Ave., Ground Flo Enter Florida street address	, Suite 2	
	Fort Lauderdal	City . Flo	rida 85004	
New Registered Agent's Signature, if changing	Registered Agent.	•	s.y/ Coue	

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>	Address	Type of Action
MGR	David Mau	515 E. Grant Street	⊟ Add
		Suite 150	□Remove
		Phoenix, AZ 85004	□Change
			□Add
			□Remove
	•		□Change
		·	□Add
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ective date, if other than the of effective date is listed, the date must tee: If the date inserted in this bloument's effective date on the De	be specific and cannot be prior ck does not meet the applic	able statutory filing requ		
cord specifies a delayed effective s filed.	date, but not an effective t	ime, at 12:01 a.m. on the	earlier of: (b) The 90th day a	fter the
October 14	2020	·		
Par	rd Man	orized representative of a m		
`	signature of a member or auth	orized representative of a fi	ember	

Filing Fee: \$25.00