L1000066367

| | (Requestor's Name) | |
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| (| (City/State/Zip/Phone #) | |
| PICK-UF | WAIT | MAIL |
| | (Business Entity Name) | |
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| Certified Copies | Certificates of | Status |
| Special Instructions | to Filing Officer: | |
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Office Use Only



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JIVISION OF COMPONATION

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| ACCOUNT NO. : 12000000195 |
|---|
| REFERENCE : 417005 7780108 |
| AUTHORIZATION ; |
| COST LIMIT 7 5 25.00 Man |
| ORDER DATE : December 11, 2014 |
| ORDER TIME : 11:07 AM |
| ORDER NO. : 417005-005 |
| CUSTOMER NO: 7780108 |
| CHANGE OF AGENT |
| NAME: BLUE WATER CONNECTION, LLC |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: |
| CERTIFIED COPY XX PLAIN STAMPED COPY |
| CONTACT PERSON: Courtney Williams EXT# 62935 EXAMINER: |

COVER LETTER

| ,TO: | Registration Sec Division of Corp | | | |
|-------------|--------------------------------------|---|--|--|
| SUR. | IECT: BLUE WA | TER CONNECTION, L | LC | |
| 000 | | | ited Liability Company | MANAGE - 19 4 - 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | | | | |
| The e | nclosed Articles of A | Amendment and fee(s) are sub | mitted for filing. | |
| Please | e return all correspor | ndence concerning this matter | to the following: | |
| | | | | |
| | | *************************************** | | |
| | | | Name of Person | |
| | | | | <u>-</u> |
| | | | Firm/Company | |
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| | | | Address | |
| | | · | | |
| | | Rhiemater | City/State and Zip Code CONNECTION Q 6 Ma to be used for future unnual report noti | 1 COM |
| | | E-mail address: (| to be used for future annual report noti | ification) |
| For fi | urther information co | oncerning this matter, please ca | | |
| | Tustin Ste | 20.10 | at (\$50) 381- | 704 |
| | Name of | Person | Area Code Daytim | ne Telephone Number |
| | | | | |
| Enclo | sed is a check for th | e following amount: | | |
| □ \$: | 25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Staţus | ☐ \$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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2014 DEC 12 AM 9: 59

BLUE WATER CONNECTION, LLC

SECRETARY OF STATE TAI LAHASSEE, FLORIDA

(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 Compar | ny were filed on 06-22-2010 and assigned |
|--|---|
| Florida document number L10000066367 | |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited lia | ability company here: |
| | |
| The new name must be distinguishable and end with the words "Limited L | iability Company." the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 104 Sandollar Dr. Panama City Beach, Fl 32408 |
| (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 h | |
| Tich | · CLANIA |
| Name of New Registered Agent: JUST | in Steele |
| New Registered Office Address: 104 | Sandollar Drive Enter Florida street address |
| | |
| Punama | City Beach . Florida 32408 |
| New Registered Agent's Signature, if changing Registered Age | nt: |
| provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offi company has been notified in writing of this change. | is provided for in Chapter 605, F.S. Or, if this document is |

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|-------------------|------------------|--|----------------|
| AMBR | Jessica Langeloh | 104 Sandollar Drive Panama City Beach FL 32 | Add |
| | | forama City Beach FL 32 | 40 Remove |
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| it amending any ott | er miormation, enter ci | nange(s) nere: (Ai | iach adainonaí sneeis, ij necessa | iry.) |
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| Effective date, if oth | er than the date of filing | g: | (optional te and cannot be more than 90 days after | l) |
| the date this document is | e specific, cannot be prior to da filed by the Florida Departmer | ite of receipt or filed dat it of State) | te and cannot be more than 90 days after | - |
| Dated <u>12/10/</u> | 14 | ·· | | |
| | wate Stu | <u> </u> | | |
| | Signature of a | member or authorized | representative of a member | |
| Justin Ste | ele,Member | | | |
| | | Typed or printed nam | ie of signee | |

Page 3 of 3

Filing Fee: \$25.00

