Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PAUL SALVER, P.A.

Account Number: 120020000087

Phone : (954)389-1333

Fax Number

: (954)389-1397

**Enter the email address for this business entity to be used for future ... annual report mailings. Enter only one email address please. **

Email Address:

ELLC AMND/RESTATE/CORRECT OR M/MG RESIGN BLUE WEB ENTERPRISE, LLC

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NOV 24 2010

EXAMINER

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Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blue Web E	interprise, LLC			
(Name of the Limited Liability Cos: (A Florida Limite	Dawy as it now appea d Liability Company)	na oar oar recerde.)		
The Articles of Organization for this Limited Liability Company were filed on		10/27/10	and assigned	
Florida document numberL10000112345				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited is	ability company be	Œ.		
The new name must be distinguishable and end with the words "L.L.C."	imited Liability Comp	any," the designation "I	LC" or the abbreviation	
Enter new principal offices address, if applicable:	7950 NW 53	rd Street	,	
(Principal office address MUST BE A STREET ADDRESS)	Suite 215			
	Miami, FL 3	3166	22 6 T	
			ASE 72	
Enter new mailing address, if applicable:	7950 NW 534	d Street	mark w	
(Mailing address MAY BE A POST OFFICE BOX)	Suite 215		9 4	
· · · · · · · · · · · · · · · · · · ·	Miami, FL 3	3166		
		,	20 69	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address b		our records, <u>enter t</u>	be name of the new	
Name of New Registered Agent:				
New Registered Office Address: 7950 NW	53rd Street, Suit			
Enter Florida street address				
	Miami	, Florida	33166	
	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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered affice 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 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:

MGR = Manager

MGRM	= Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add Retaions
·			Add Remove
			Add
	·		Add Remove
-			Add
<u></u> -			AddRemove
D. If am	ending any other information, enter cl	saugo(s) bere: (Attach additional sheets, if necessary	<i></i>
	Article V: Address of Manager cl Miami, FL 33166		FIL 10 NOV 23
Dated	11.19.2010 V WQ	5	AND OS
	V/ P(exac Ben	mber or authorized representative of a member Outh - Court wow Wed or printed name of signee	

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Filing Fee: \$25.00