(show		the fax audit number
	n below) on the top and bottom of all pages of the	le document.
	(((H12000222084 3)))	
	H120002220843ABCV	
Note: DO NO	T hit the REFRESH/RELOAD button on your br Doing so will generate another cover sheet	owser from this page.
To: From:	Division of Corporations Fax Number : (850)617-6383 Account Name : EMPIRE CORPORATE KI Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696 all address for this business entity to	7:51 STATE LORIDA
annual re Email Add	port mailings. Enter only one email add	
RECEIVED 12 SEP - 7 PH 4 14 16 SECHERARY OF STATE TALLAHASSEE, FLORIDA	AMND/RESTATE/CORRECT OR M/M BLUE 4002 LLC Certificate of Status 0 Certified Copy 0 Page Count 03 Estimated Charge \$25.0	C. LEWIS

i

-

		+112000222
-		FILED
	ARTICLES OF AMENDM	ENT 12 SEP -7 AM 7
		SECRETARY OF C
	ARTICLES OF ORGANIZA OF	SECKETARY OF ST FALLAIMSSEE, FLO
	BLUE 4002 LLC	
	The of the Limited Liability Company as it now ap (A Floride Limited Liability Company	pears on our records,) iy)
The Articles of Organization	for this Limited Liability Company were filed on	08/09/2011 and assigned
Florida document number	L11000091559	
This and an and the state of the second	to uncert the full cutton	
This amendment is submitted	to amend the tonowing:	
A. If amending name, enter	the new name of the limited liability company	here:
"L.L.C." Enter new principal offices		
<u>Principal office address MU</u>	<u>IST BE A STREET AODRESS)</u>	
Enter new mailing address,	if annHeshlar	
Mailing address MAY BE A		
	ered agent and/or registered office address o new registared office address here:	on our records, enter the name of the ne
Name of New Rogis	tered Agent:	
New Registered Off	ice Address:	
		Enter Florida street address
		, Florida
	City	Zip Code

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 mershy 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

Page 1 of 2

l

H1200022208

ļ

li amending the Munnyers of Munnying Members on our records, gaves the title, name, and andress of each Manneer or Mannetas Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

٠,

.

Lits	Nama	Address	Type of Action
MGR	Carlos Gustavo Krieger	9130 S Dadeland Blvd Suba 1509 Miemi, FL 33156	Add Remove
MGR_	GUSTAVO KRIEGER	9130 8 Datalant Blvd Suite 1509 Miami, FL 33158	Add
*			Add Ramove
			Add Roraove
<u>*</u>			Remove

D. II amonding any other information, enter change(s) here: (Atmah additional sheets, if near sary.)

		f	
		ALC: NEC:	12 S
			SEP
		SS-	-
Daled	September 7 2012//.	PO	1>
			AM .
	Signature of a memory of suttorized representative of a memory	TATE ORIDA	H
	Guatelvo Krieger / MGR	5 T	<u>5</u>
	Page 7 of 2		
	/		

FILED

ų,

1