L12000	008847
(Requestor's Name) (Address) (Address)	600252711766
(City/State/Zip/Phone #)	10/11/1301017011 **30.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 13 OCT 11 PM 12: 04 SECRETARY OF STATE TALLAHASSEE. FLORIDA

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OCT 1 5 2013 T. BROWN

COVER LETTER			
TO: Registration Section Division of Corporations			
SUBJECT: Lealm of Disital Name of Limite	ed Liability Company		
The enclosed Articles of Amendment and fee(s) are subr	mitted for filing.		
Please return all correspondence concerning this matter t	to the following:		
\bigcirc	· · · ·		
- Kay P	Illisood		
	Name of Person		
	Firn/Company		
YOZY NW	Address		
- Newsterry	FL. S2669	Managenetica, jer	
E-mail address: (to	be used for future annual report notification)		
For further information concerning this matter, please call:			
Quilling	at (352) 474 - 6246		
Name of Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:			
□ \$25.00 Filing Fee ■ \$\$\$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	e of Status &	
•			
MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section		
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

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ARTICLES OF A	MENDMENT
• · · · TO	\mathcal{F}_{II}
ARTICLES OF O	(ゴヘニー・ビー)
OI	Start - U
	TALLAETAD PH12.
Kealm of Disital Line	SILL C MASSOCIE
(<u>Name of the Limited Liability Compan</u> (A Florida Limited L	is as it now appears on our records $f_{A} \sim A_{A}$
	autily company,
The Articles of Organization for this Limited Liability Company	were filed on 1/19/2012 and assigned
Florida document number <u>L1200008847</u>	
Florida document number <u>C12000008171</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
A. It allending hame, enter the new hame of the himted ham	ney company nere.
Blue Dragon System Z, L	40
The new name must be distinguishable and end with the words "Limit	ed Liability Company," the designation "LLC" or the abbreviatio
"L.L.C."	
Enter new principal offices address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	\mathbf{h}
B. If amending the registered agent and/or registered off	fice address on our records, enter the name of the new
registered agent and/or the new registered office address her	
Nome of New Degistered Agenti	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	D ianida
V Ward Reserves and	, Riorida City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	,
the set of the second	as to get in this capacity. I firstlaw gaves to complement
I hereby accept the appointment as registered agent and agra the provisions of all statutes relative to the proper and compa	se to act in this capacity. I jurner agree to comply with lete performance of my duties, and I am familiar with and
accept the obligations of my position as registered agent as j	provided for in Chapter 608, F.S. Or. if this document is
being filed to merely reflect a change in the registered office	
company has been notified in writing of this change.	

If Changing Registered Agent, Signature of New Registered Agent

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

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MGR = Manager MGRM = Managing Member

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Filing Fee: \$25.00