#1/2000/132268

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(Document Number)	
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2015 JUN-1 PH 2: 24

K.SALY EXAMPLER JUN - 2 2015

COVER LETTER

	gistration Sec ision of Corp	
SUBJECT:	Blue Sky Re	alty Group, LLC
SUBJECT.		Name of Limited Liability Company
The enclosed	l Articles of A	mendment and fee(s) are submitted for filing.
Please return	all correspon	dence concerning this matter to the following:
		John Munn
		Name of Person
		Blue Sky Realty Group, LLC
		Firm/Company
		7534 Pointe Venezia Drive
		Address
		Orlando FL 32836
		City/State and Zip Code
		johnmunn@me.com
		E-mail address: (to be used for future annual report notification)
For further in	formation co	ncerning this matter, please call:
John Munn		407 729-5623 at ()
	Name of	
Enclosed is a	check for the	following amount:
≭ \$25.00 Fi	iling Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status 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 2015 JUN-1

		TOTA J/A
Blue Sky Realty Group, LLC		PH 2.
(Name of the Limited Liability Co.	mpany as it now appears on our re-	cords:) TCGARY OF STATE and assigned
(A Figure 2000)	ted Diability Company)	TAMASSEE, FLAIL
e Articles of Organization for this Limited Liability Compa	any were filed on 10/17/2012	and assigned
orida document number L12000132268	•	
nda document number		
s amendment is submitted to amend the following:		•
	liability compony boys	
If amending name, enter the new name of the limited I	nadinty company nere:	
new name must be distinguishable and contain the words "Limited L	iability Company," the designation "	LLC" or the abbreviation "L.L.C."
ter new principal offices address, if applicable:		
incipal office address MUST BE A STREET ADDRESS	')	
Methus Office dualess Most BE Hollings (Most		
ter new mailing address, if applicable:		
uiling address MAY BE A POST OFFICE BOX)		
		•
If amending the registered agent and/or registered		ords, enter the name of the r
istered agent and/or the new registered office address	<u>here</u> :	
Name of New Registered Agent:		
Navy Pagistared Office Address		
New Registered Office Address:	Enter Florida street ac	ldress
		Di
	Citv	, FloridaZip 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 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>	Name	Address	Type of Action
MGR	Deanna Benetti	7534 Pointe Venezia Drive, Orland	Add
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			□ Add
			Remove
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ffective date, if other than t an effective date is listed, the date i	nust be specific and cannot be	prior to date of filing	or more than 90 days aft	t ional) er filing.) Pursuant to 605.0207 (
ote: If the date inserted in this	block does not meet the	pplicable statutory	filing requirements, th	is date will not be listed as t
ocument's effective date on the	Department of State's re-	cords.		
e record specifies a delay The 90th day after the r	red effective date, bu ecord is filed	it not an effecti	ve time, at 12:01	a.m. on the earlier of:
The source are recording to	coord is med.			
May 29	2015			
ated		· ·		
		+		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00