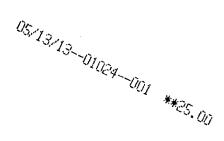
## L130000033422

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FILED SECRETARY OF STATE DIVISION OF CORPORATION

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## **COVER LETTER**

TO:

Registration Section Division of Corporations

BLUE STRAWBERRY DEVELOPMENTS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RYAN PATTON, CPA

Name of Person

PURVIS GRAY AND COMPANY

Firm/Company

5001 LAKEWOOD RANCH BLVD., SUITE 101

Address

SARASOTA, FLORIDA 34240

City/State and Zip Code

RPATTON@PURVISGRAY.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RYAN PATTON

.941 <u>.</u>9070350

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

□\$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

## EGOA REALTY LLC

(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 Company Florida document number $\underline{L13000033422}$ .	were filed on MARCH	5, 2013 and assigned SECR
This amendment is submitted to amend the following:		TY -
A. If amending name, enter the new name of the limited liabi	lity company here:	SECRE JARY OF SATION OF CORPORATION OF CORPORATION OF CORPORATION OF CORPORATION OF SATION OF SA
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the	designation "LLC" or the abterviates
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		- tile-
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	ice address on our reco	ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		<del>_</del>
	Enter Flori	da street address
		, Florida
	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 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 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

Add  Add  Remove
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Add Remove

D. If amending an	y other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated	
	Signature of a member or authorized representative of a member
	ORLANDO ARROYO
	Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

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