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(Re	questor's Name)		
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K. SALY
JUL o 1 2017

COVER LETTER

TO: ,	Registration Se Division of Cor		i	
emb m		PEARL LLC		
SUBJE	C1:	Name of Lim	ited Liability Company	
The enc	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		CHRISTINE TORRES	·	
			Name of Person	
		LAW FIRM OF JOSH N.	BENNETT, ESQ.	
			Firm/Company	
		440 N. ANDREWS AVEN	NUE	
			Address	
		FORT LAUDERDALE, F	L 33301	
			City/State and Zip Code	
		josh@joshbennett.com		
		E-mail address: (to be used for future annual report not	ufication)
For furt	her information o	oncerning this matter, please co	all:	
Christi	ne Torres		954 7 7 9-1661	
	Name o	f Person		ne Telephone Number
Enclose	ed is a check for t	he following amount:		
\$25	i.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/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	rations Tenter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2017 JUL 25 PM 3:33
TALLAMASSEE FLORIDA

MYBLUEPEARL 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	were filed on MAY 08, 2013	and assigned
Florida document number L13000067573		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		 .
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:		er the name of the new
New Registered Office Address:		
	Enter Florida street address	
		Zip Code
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Code
•		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I a provided for in Chapter 605, F.S. (m familiar with and Or, if this document is
If Chan	iging Registered Agent, Signature of New	Registered Agent

Page 1 of 3

GR = Manager IBR = Authorized Member			TILED	FILED		
	<u>Name</u>	Address A	JUL 25 PM 3: 33	Type of Action		
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Correcting the name of the	Managing Member from	"Achi" to "Ashi"	<u>. </u>		
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		<u>-</u> .	- - -	TALL AHASSI	3: 34
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Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	oust be specific and cannot be block does not meet the a	pplicable statutory			
the record specifies a delay) The 90th day after the re		t not an effect	ive time, at 12	2:01 a.m. on the	e earlier of:
Dated July 24	2017				
·	Signature of a member or	authorized represen	tative of a member		
Josh N. Bennett, Esq.	- Attorney				
	Typed or	printed name of sign	! nee 		
	I	Page 3 of 3			

Filing Fee: \$25.00