

L13000073487

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

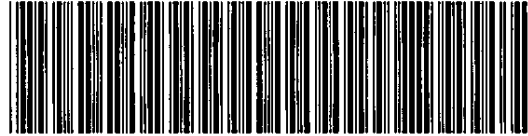
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Blue Sky Group, 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:

Christine Thurman

Name of Person

Blue Sky Group, LLC.

Firm/Company

777 S. Federal Highway; Ft. Lauderdale, F

Address

Ft. Lauderdale, Florida 33316

City/State and Zip Code

Cthurman@bhgfirst.com

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

For further information concerning this matter, please call:

Christine Thurman

Name of Person

at (954)

Area Code

525-2200

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

16 AUG 18 PM 1:23
OFFICE OF THE
CLERK OF THE
SUPREME COURT
OF THE STATE OF
FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Blue Sky Group, 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 5/20/2013 and assigned Florida document number L13000073487.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Blue Sky Development Group, LLC.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

777 S. Federal Highway

Ft. Lauderdale, FL. 33316

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

777 S. Federal Highway

Ft. Lauderdale, FL. 33316

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Christine Thurman

New Registered Office Address: 777 S. Federal Highway

Enter Florida street address

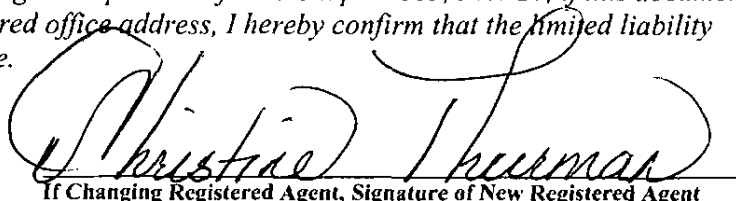
Ft. Lauderdale, Florida 33316

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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR/Pres	Gene A. Whiddon , Jr.	777 S. Federal Highway	<input checked="" type="checkbox"/> Add
		Ft. Lauderdale, Florida 33316	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR/VP	Gene Whiddon, Jr. III	777 S. Federal Highway	<input checked="" type="checkbox"/> Add
		Ft. Lauderdale, Florida 33316	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR/Sec.	Catherine Whiddon	777 S. Federal Highway	<input type="checkbox"/> Add
		Ft. Lauderdale, Florida 33316	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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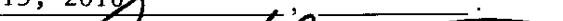
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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

August 15, 2016



Signature of a member or authorized representative of a member

Typed or printed name of signee