

L130000074632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

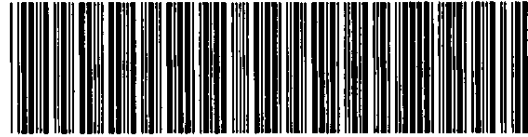
(Business Entity Name)

(Document Number)

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FILED
2013 MAY 30 AM 11:43
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

MAY 31 2013

J. BRYAN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Blue Sky Treatment, 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:

Andrew Friis

Name of Person

Blue Sky Treatment, LLC

Firm/Company

801 NE 71st

Address

Boca Raton, FL 33487

City/State and Zip Code

afriis@aim.com

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

For further information concerning this matter, please call:

Andrew Friis

Name of Person

at (561) 866-5900

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

FILED
2013 MAY 30 AM 11:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Blue Sky Treatment, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FL 32399

The Articles of Organization for this Limited Liability Company were filed on 5/22/2013 and assigned
Florida document number L13000074632.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and end with 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Michael C. Byron

New Registered Office Address:

901 East Sample Rd. Unit J

Enter Florida street address

Pompano Beach

City

Florida 33061

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Andrew Friis	901 East Sample Rd Unit J	<input checked="" type="checkbox"/> Add
		Pompano Beach, FL 33061	<input type="checkbox"/> Remove
MGR	Maritsa Yzaguirre	12773 W. Forest Hill Blvd. Ste. 209	<input type="checkbox"/> Add
		Wellington, FL 33414	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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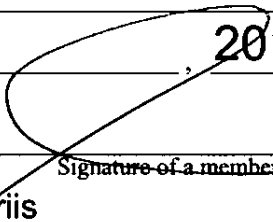
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 SEVENTH JUDICIAL CIRCUIT
 PLEASANTON, FLORIDA

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

Please note that the following changes have been made

change of Registered Agent and MGR.

Dated May 24th, 2013


Signature of a member or authorized representative of a member

Andrew Friis

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA