Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Fax Number

: (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

22	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BLUE DIAMOND RENTALS, LLC

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\$25.00

Electronic Filing Menu

Corporate Filing Menu

T Burch 45124 2013

https://efile.sunbiz.org/scripts/efilcovr.exe

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLUE DIAMOND (Name of the Limited Liability Compa	RENTALS, LLC			
(Name of the Limited Liability Compa (A Florida Limited L	lability Company)			
The Articles of Organization for this Limited Liability Company	were filed on October 21, 2013	and assigned		
Florida document numberL13000148879	 	·		
		2		
This amendment is submitted to amend the following:		돌한 용 -		
A. If amending name, enter the new name of the limited liab	ASS			
		m _c ω μ		
The new name must be distinguishable and end with the words "Limi "L.L.C."	ned Liability Company," the designation "	LLC of the obbidiation		
Enter new principal offices address, if applicable:	756 Blue Mountain Rd	8: 2 TATE .0RID		
(Principal office address MUST BE A STREET ADDRESS)	Santa Rosa Beach, FL 32459			
	· · · · · · · · · · · · · · · · · · ·			
Enter new mailing address, if applicable:				
(Malling address MAY BE A POST OFFICE BOX)				
				
B. If amending the registered agent and/or registered of	fice address on our records, enter	the pame of the new		
recistered agent and/or the new registered office address her	E:			
Name of New Desistered Assess				
Name of New Registered Agent:				
New Registered Office Address:	Registered Office Address: Enter Florida street address			
	. Florida			
	City	Zip Code		
New Registered Agent's Signature, if changing Registered Agent;				
I hereby accept the appointment as registered agent and agr	ee to act in this canacity. I firther as	mee to comply with		
the provisions of all statutes relative to the proper and comp.	lete performance of my duties, and I	am familiar with and		
accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	provided for in Chapter 608, F.S. Or, address, I hereby confirm that the ii	, if this document is mited liability		
company has been notified in writing of this change.		•		

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 = M MGRM =	anager Mauaging Member		
Title	Name	Address	Type of Action
			Add
			Remove
			23 SSEE
			# 2
			DA CREMOVE
•		<u> </u>	Rémove
			Add
			Remove
			·
		·	Add
			Remove
			Remove
			Add
			Remove

756 Blue Mountain Road				
Santa Rosa Beach, FL 3	1459			
October 23	2013			
1	Tellian T. Parka			
	ignature of a member or authorized representative of a member			

Filing Fee: \$25.00

13 OCT 23 AM 8: 26
SECRETARY OF STATE
TALLARY OF STATE
TALLARY OF STATE

FL053 - 05/16/2013 Walters Klower Collect