Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Fax Number : (954)208-0845

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BLUEPEARL REAL ESTATE, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
| Page Count | 04 |
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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| BluePearl Real Estate, ELC | | |
|---|--|---|
| (Name of the Limited Liability Com (A Florida Limited | pany ay it now appears on our records.) d Liability Company (| |
| The Articles of Organization for this Limited Liability Compar Florida document number L13000162276 | ny were filed on 11/18/2013 | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited lia | ability company here: | |
| The new name must be distinguishable and contain the words "Limited Lia | bility Company," the designation "LLC" or the a | 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 offic agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: | e address on our records, <u>enter the na</u> | The new FILED FILED PANEL OF LAHASSEE, F |
| , te a registrate y till a registration | Enter Florida street address | 112: S TA C OR |
| | , Florida | 2: 50 TATE ORID |
| | City | ~Zip Code |
| New Registered Agent's Signature, if changing Registered Agen | | |
| I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offi company has been notified in writing of this change. | ete performance of my duties, and Lam is provided for in Chapter 605, F.S. Oi | n familiar with and r, if this document is |
| II C | hanging Registered Agent, Signature of New B | legistered 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

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| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|--------------------|--|----------------|
| Manager | Darryl S. Shaw | 2950 Busch Lake Blvd., Tampa, FL 33614 | □Add |
| | | | • Remove |
| | | | □Change |
| Manager | Nicholas R. Nelson | 2950 Busch Lake Blvd., Tampa, FL 33614 | Add |
| | | | Remove |
| | | | □Change |
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| Note: If a | e date, if other the live date is listed, the the date inserted in it's effective date o | n this block does | not meet the appl | licable statutory fil | (option more than 90 days after ling requirements, this | onal) filing.) Pursuant to 605.0 date will not be listed |)207 f as |
| | | effective date, bu | it not an effe ctive | time, at 12:01 a n | n on the earlier of (b) | The with day after the No. 18 CO. | the |
| | | | | | | <i>≦2</i> | |
| d is filed. | nuary 5 | | 2022 | · | | ASSE ASSE | <u> </u> |
| d is filed. | | | | | | WII P ASSEE, F | FILEC |
| rd is filed. | | | | thorized representati | ive of a member | SECRE SAY OF STATE ALLUMIASSEE, FLORIDA | FILED |