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(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 23 2015
S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BLUE GROUP ASSETS 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:

PAMELA ORDONEZ

Name of Person

TRIBEK CONSULTING LLC

Firm/Company

40 SW 13 ST SUITE 703

Address

MIAMI, FL 33130

City/State and Zip Code

JCANON@BROKERSTITLES.COM

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

For further information concerning this matter, please call:

PAMELA ORDONEZ

305 2979222
at ()

Name of Person

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

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TALLAHASSEE, FLORIDA

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	FUENTES, MARIA I	40 SW 13 ST SUITE 703	<input type="checkbox"/> Add
		MIAMI, FL 33130	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	FAJARDO, JORGE E	40 SW 13 ST SUITE 703	<input type="checkbox"/> Add
		MIAMI, FL 33130	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGMR	BLAVAGAT INVESTMENT S.A.	CALLE AQUILINO DE LA GUA	<input type="checkbox"/> Add
		EDIFICIO IGRA, 5TO PISO	<input type="checkbox"/> Remove
		CIUDAD DE PANAMA, REPUB	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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JUN 22 10 50 AM '11
FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE

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

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated

ed July 15, 2015
Pamela Ordóñez
Signature of a member or authorized representative of the organization

Signature of a member or authorized representative of a member

PAMELA ORDONEZ

Typed or printed name of signee

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