# L14000038183

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### **COVER LETTER**

Division of Cor		•	
SUBJECT: B	JUE SKY REAL &	STATE FL. LLC	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Nancy Werr	Name of Person	
	Blue Sky DE	AL ESTATE Firm/Company	<del></del>
	3687 Kingsto	11001000	
	Sarasota FL	34238	
	Blue Skyreales E-mail address: (	City/State and Zip Code  State Flog gmay - 9  to be used for futural annual report noti	fication)
For further information c	oncerning this matter, please ca	all:	
Nancy We	f Person	at (941) 587- 3 Area Code Daytim	3 49) e Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fce	☐ \$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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	OF			- n
Blue Sky Asal Estat (Name of the Limited Liability (A Florida I	Company as	it now appears ty Company)	2023 NOV 27 /	년 9: 0 <b>3</b>
The Articles of Organization for this Limited Liability Co Florida document number <u>L 140000 38 18 3</u>	mpany were	filed on $\frac{3}{2}$	s  2014	STATE  SS and assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability	company her	<u>re</u> :	
The new name must be distinguishable and contain the words "Limite	ed Liability Co	unpany," the de	signation "LLC" or the a	obreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>		<u>-</u>	
(Principal office address MUST BE A STREET ADDRI	<u> </u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		·		-
				<del></del>
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office addr	ess on our re	cords, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:				
New Registered Office Address:			- <del>-</del>	<del></del>
		Enter Flori	da street address	
		City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered		- 3		•

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>	Name	Address	Type of Action
AMBR	John Werner Ir	3687 Kingston Blud Sarasota FL 34238	BAdd
		Sarasota FL 34238	□Remove
			□Change
			□Add
			□Remove
			□ Add
			Remove
			Change
			□Add
			□ Remove
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Effective date, if oth If an effective date is listed Note: If the date inser document's effective d	ted in this block do	es not meet the app	licable statutory fil	more than 90 days afing requirements, t	o <b>tional)</b> der filing.) Pursuant to his date will not be	605.020 listed a
e record specifies a dele rd is filed.	ayed effective date,	but not an effective	time, at 12:01 a.n	on the earlier of:	(b) The 90th day	after the
Dated 12/19		11 // M	<u>3</u> .			
	MMU Signay	dre of a member or au  Werner  Typed or pri	thorized representati	ve of a member		_
	1	, 1				

Filing Fee: \$25.00



December 12, 2023

NANCY WERNER 3687 KINGTON BLVD SARASOTA, FL 34258

SUBJECT: BLUE SKY REAL ESTATE FL LLC

Ref. Number: L14000038183

We have received your document for BLUE SKY REAL ESTATE FL LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 423A00028306

Anissa Butler Regulatory Specialist II

www.sunbiz.org