115000027306

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	• "
(Ci	ty/State/Zip/Phon	e #)
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(Bu	ısiness Entity Naı	me)
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And

MAR 25 2015

R. WHITE

BluRabbit LLC

Contact number: 754-264-3219

Contact Name: Rodrigo Esteves

Address: 861 NE 191st st

Miami, FL 33179

COVER LETTER

Division of Co	rporations		
Blurabbi	t LLC		
	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspondence	ondence concerning this matter t	to the following:	
	Michelle Vit		
		Name of Person	
	Blurabbit LLC		
		Firm/Company	
	861 NE 191st st		
		Address	
	Miami, FL 33179		
		City/State and Zip Code	
	rod@liveultimate.com		
	E-mail address: (to	o be used for future annual report notifica	ation)
For further information of	concerning this matter, please ca	11:	
Rod Esteves		754 264-3219	
Name o	f Person		elephone Number
Enclosed is a check for t	he 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)

TO:

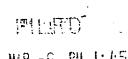
Registration Section

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

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**



15 MAR -6 PH 1:45

Blurabbit LLC		(1) (1)	
(Name of the Limi	ted Liability Company as it now app (A Florida Limited Liability Company	ears on our records.)	Addelight shifts A
The Articles of Organization for this Limited L Florida document number <u>L15000027306</u>	iability Company were filed on	02/12/2015	and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liability company	here:	
The new name must be distinguishable and end with the	words "Limited Liability Company," t	he designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applied	able:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
		11.	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	or registered office address	on our records, <u>enter</u>	the name of the new
New Registered Office Address:	Enton	lorida street address	
	Liner 1		
	City City	, Florida	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as region being filed to merely reflect a change in the company has been notified in writing of this	er and complete performance stered agent as provided for in registered office address, I her change.	of my duties, and I am j 1 Chapter 605, F.S. Or,	amiliar with and if this document is nited liability

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

Title	<u>Name</u>	Address	Type of Action
MGR	Michelle Vit	861 NE 191st st	≝ Add
	·	Miami, FL 33179	□ Remove
MGR	Rodrigo Esteves	861 NE 191st st	
		Miami, FL 33179	Remove
· · · · · · · · · · · · · · · · · · ·	· .		
			Remove
			Add Remove
····			Add
		· · · · · · · · · · · · · · · · · · ·	☐ Remove
		· .	
			
•		· · ·	□ Remove

amending any other information, enter change(s) here: (Attach ad	unional sneets, y necessary.)
4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	
ective date, if other than the date of filing:	(optional)
effective date must be specific, cannot be prior to date of receipt or filed date and can date this document is filed by the Florida Department of State)	not be more than 90 days after
March 2nd 2015	
<u> </u>	
2-V-9t	
Signature of a member or authorized represent	ative of a member
Signature of a member or authorized representations Rodrigo Esteves	ative of a member

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Filing Fee: \$25.00