L15000136484

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2022 HAY -7 PH 2: 26

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COVER LETTER

TO: Registration of	on Section Corporations		
Blu Br SUBJECT:	el LLC		
	Name of Lir	nited Liability Company	
The enclosed Article	es of Amendment and fee(s) are sul	bmitted for filing.	
Please return all com	respondence concerning this matter	to the following:	
	Paul Cipparone, Esquire		
	-	Name of Person	
	Cipparone & Cipparone, I	P.A.	
		Firm/Company	
	1525 International Parkwa	ay, Suite 1071	
		Address	
	Lake Mary, FL 32746		
		City/State and Zip Code	
	Pcipparone@cipparonepa.c		
		to be used for future annual report notif	ication)
For further information	on concerning this matter, please c	all:	
Paul Cipparone, Esqu	uire	321 275-5914	
Nai	ne of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	El \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

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(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City Zip Code	Blu Brd LLC		
The Articles of Organization for this Limited Liability Company were filed on August 10, 2015 and assigned Florida document number L15000136484 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the 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 office address on our records, enter the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Line Florida	(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.)	•
Florida document number L15000136484 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address			·
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New Registered Office Address: Enter Florida street address	registered agent and/or the new registered office address her	<u>e</u> :	
New Registered Office Address: Enter Florida street address			
Enter Florida street address	Name of New Registered Agent:		
Enter Florida street address	New Registered Office Address:		
City Zip Code		Enter Florida street address	
City Zip Code		F71 + 1	
,		City , Florida	Zip Code
	New Registered Agent's Signature, If changing Registered Agent:	•	

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 = N $AMBR = A$	Aanager Authorized Member	2022 HAY -7 PH 2: 26	
Title	<u>Name</u>	Address	Type of Action
MGR	Zaida Concilio	1566 Westover Loop	\= Add
		Lake Mary, FL 32746	Remove
			Change
			D Add
			Remove
			☐ Change
			□ Add
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			Change
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(If an effective date, if other than the control of the control of the date is listed, the date must Note: If the date inserted in this bloodocument's effective date on the Department.	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)
the record specifies a delayed The 90th day after the reco	effective date, but not an effective time, at 12:01 a.m. on the earlier of: rd is filed.
Dated May	2021
	ignature of a member or authorized representative of a member
Joseph Concilio, MGRM	
	Typed or printed name of signee

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Filing Fee: \$25.00