15000172077

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies		of Status
Special Instructions to	Filing Officer:	
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FALLAMASSEE, FLORIDA

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COVER LETTER

Division of Corpo	rations				
SUBJECT:	Blue Square Finan	cial, LLC			
SUBJECT:	Name of Limi	ted Liability Company			
The enclosed Articles of Ar	mendment and fee(s) are subr	nitted for filing.			
Please return all correspond	lence concerning this matter t	o the following:			
	Kea	thel Chauncey, Esq			
		Name of Person			
	Free	sh Legal Perspective, PL			
	-	Firm/Company			
	3802	2 Ehrlich Road, Suite 308			
		Address			
	Tam	pa, FL 33624			
	_	City/State and Zip Code			
Contact@BLTFL.com E-mail address: (to be used for future annual report notification)					
For further information con	cerning this matter, please ca	-	, cuitour,		
Keathel Chauncey, Esq.		813 448-1042 at ()			
Name of F	erson	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:

TO:

Registration Section

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

Blue Square Financial, LLC		
(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)	
the Articles of Organization for this Limited Liability Comparida document number L15000172077	any were filed on10/08/2015	and assigned
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited l	iability company here:	
he new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
<u>Principal office address MUST BE A STREET ADDRESS</u>	2	
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	673 A Lumsden Road Brandon, Florida 33511	
. If amending the registered agent and/or registered		nter the name of the
gistered agent and/or the new registered office address	nere:	SSE C
Name of New Registered Agent:		TO E
New Registered Office Address:	Enter Florida street address	1: 22 LORIDA
	. Floric	-
	City	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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Jana Edmond-Hill	3802 Ehrlich Road, Suite 308	□ Add
		Tampa, FL 33624	■ Remove
			□ Change
MGR	Marquisha McIntosh	3802 Ehrlich Road, Suite 308	Add
		Tampa, FL 33624	■ Remove
			□ Change
MGR	Weston Owen Hill	673 A Lumsden Road	■ Add
		Brandon, FL 33511	Remove
			Change
MGR	Terrance Giovonni Smith	673 A Lumsden Road	₽ Add
		Brandon, FL 33511	Remove
			Change
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ote: If the date inserted in this block does not meet the app	plicable s	tatutory fi	ling requ	rements,	this date	will n	ot be l	isted a
cument's effective date on the Department of State's recor	rds.							
record specifies a delayed effective date, but	not an	effectiv	e time,	at 12:0	1 a.m.	on th	ne ear	lier (
The 90th day after the record is filed.								
December 1 2015								
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Martin Maria								
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00