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SECRETARY OF STATE AS SECRETARY OF CORPORATIONS

N. CAUSSEAUX JUN 3 0 2017

COVER LETTER

TO:	Registr Divisio	ation S n of Co	t ection rporations							
SUBJ	ect.		Blue Do	asis L	L.					
эсва	EC1			me of Limited	Liability Compar	ny		_		
The en	closed Art	ticles of	Amendment and fee(s) are submitt	ed for filing.		•			
Please	return all	corresp	ondence concerning th	is matter to th	ne following:			SEC	3 1	70
				Mai	Name of Person	asis LLC	:	RETARY OF STATE	JUN 29 PH S PM	ECEIVED.
			F). O Box	3540 Address	5		→ —	_	
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For fur	ther inform	nation (oncerning this matter	, please call:						
	MOU	CUS Name o	Anderson Of Person		at (B13 Area Cod) <u>380-9</u> Daytimo	1843 Telephone Num	ber	_	
Enclos	ed is a che	ck for t	he following amount:							
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June 23, 2017

MARCUS ANDERSON BLUE OASIS LLC P.O. BOX 35465 ST. PETERSBURG, FL 33705

SUBJECT: BLUE OASIS LLC Ref. Number: L16000092060

We have received your document for BLUE OASIS 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):

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

The form submitted is for a corporation not an LLC.

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) 245-6051.

Letter Number: 117A00012775

Nanette Causseaux Regulatory Specialist II Supervisor

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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, ARTICLES OF	ORGANIZATION OF	SECR VISIO
Blue Oasis (Name of the Limited Liability Com	pany as it now appears on our records.) d Liability Company)	CRETARY OF COR
(A Florida Limited The Articles of Organization for this Limited Liability Compan Florida document number <u>L1600092060</u> .	•	and assigned in the second
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	bility Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O Box 35465 SI. Peters burg, FL	33105
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, <u>enter</u> e <u>re</u> :	the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Mwabufo C. Chidolo E Fultrot Investments LC	1239 4th St South St. Petersburg FL 83701	
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Effective dat	e, if other than t	he date of fili	ng:			(optional))	
f an effective d	te, if other than that is listed, the date late inserted in this	must be specific a	nd cannot be pr	ior to date of fi	ing or more than s	0 days after filin	g.) Pursuant to	605.0207
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		Signature of	arhemberrorau	thorized repres	entative of a men	iber		

Page 3 of 3

Filing Fee: \$25.00