

L16 000098261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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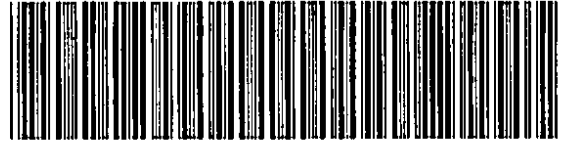
(Business Entity Name)

(Document Number)

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2022 MAR 14 AM 6:37

SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER

MAR 28 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BLUEMARK TRADING LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIE B. CODE, ESQ.

Name of Person

MARIE B. CODE, ESQ., P.L.

Firm/Company

1308 SW 27TH TERRACE

Address

CAPE CORAL, FLORIDA 33914

City/State and Zip Code

MARIE@MARIEESQUIRE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIE B. CODE, ESQ.

239 829-0063
at ()

Name of Person

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:

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

FILED

2022 MAR 14 AM 6:37

SECRETARY OF STATE
TALLAHASSEE, FL

BLUEMARK TRADING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on MAY 19, 2016 and assigned
Florida document number L16000098261.

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:

1308 SW 27TH TERRACE

(Principal office address MUST BE A STREET ADDRESS)

CAPE CORAL, FLORIDA 33914

Enter new mailing address, if applicable:

1308 SW 27TH TERRACE

(Mailing address MAY BE A POST OFFICE BOX)

CAPE CORAL, FLORIDA 33914

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

Florida

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> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|---------------------|-----------------------------|--|
| MGR | MELISSA KENIHAN | 5781 LEE BLVD. 208-107 | <input type="checkbox"/> Add |
| | | LEHIGH ACRES, FLORIDA 33971 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | MELISSA KENIHAN | 1308 SW 27TH TERRACE | <input checked="" type="checkbox"/> Add |
| | | CAPE CORAL, FLORIDA 33914 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | PHILIP JOHN KENIHAN | 5781 LEE BLVD. 208-107 | <input type="checkbox"/> Add |
| | | LEHIGH ACRES, FLORIDA 33971 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | PHILIP JOHN KENIHAN | 1308 SW 27TH TERRACE | <input checked="" type="checkbox"/> Add |
| | | CAPE CORAL, FLORIDA 33914 | <input type="checkbox"/> Remove |
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[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated MARCH 1 2022

MELISSA KENNAN, MANAGER

Typed or printed name of signee