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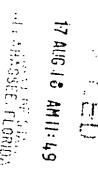
(Re	questor's Name)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

Division of Co			
Big Blue S			
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please return all corresponden	ondence concerning this matter	to the following:	
	Matthew Roberts		
		Name of Person	
	Big Blue Sea, LLC		
		Firm/Company	
	9293 Fruitland Ave		
		Firm/Company e Address 1224 City/State and Zip Code 0.com address: (to be used for future annual report notification) please call:	
	Englewood, Fl. 34224		
	mroberts01@yahoo.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	ication)
For further information	concerning this matter, please c	all:	
Matthew Roberts		941 929-6575 at () Area Code Daytime	
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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Big Blue Sea, LLC		
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears on our records Limited Liability Company)	.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 9/14/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted 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 ADDRI	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		22
		7
		S
B. If amending the registered agent and/or registered agent and/or the new registered office address.		enter the name of the nev
Name of New Registered Agent:		11:49 10000
New Registered Office Address:	Enter Florida street address	
	FL	rida
	, FIO	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>	Type of Action
AMBR	Matthew Roberts	9293 Fruitland Ave	DAdd
		Englewood, FL 34224	□ Remove
			Change
AMBR	Azucena Cuateco	9293 Fruitland Ave	Add
		Englewood, FL 34224	ПРатоги
		<u> </u>	☐ Change
			Add
			☐ Remove
			☐ Change
			□ Remove
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ective date, if other than the d	ate of filing:	· · · · · · · · · · · · · · · · · · ·	·····	(op	tional)		6,9
an effective date is listed, the date must be tel: If the date inserted in this bloc becument's effective date on the Dep	k does not meet t	he applicable	te of filing or me statutory filing	re than 90 days at requirements, (iter filing.) :his date v	Pursuant to vill not be	o 605,02 : listed a
record specifies a delayed of the 90th day after the recor	effective date, d is filed.	but not an	effective ti	me, at 12:0:	l a.m. c	in the e	arlier
August 15	20	17					
		277					
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Page 3 of 3

Filing Fee: \$25.00