4600187397

(Ke	equestor's Name)	
— (Ad	dress)	
———(Ad	ldress)	· · · · ·
— (Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
	ısiness Entity Nan	ne)
(50	isiness Chury Maii	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	, g =	
L		

Office Use Only



300304080143

10/02/17==01014==009 **30.00

7/1/17

7 OCI -2 AM IO 3

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Blue Island Buildus LC 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:
Mira BAptista
Name of Person
Blue Island Brilders LCC
2500 Curry Fird Rd #7
Or Condo, F. 3280 Co City/State and Zip Code
Blue 15 and mica @ he thouse (M) E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MICABAPTSTA at (UD) 914-0701 Name of Person Area Code Daytime Telephone Number
Area Code Dayanie Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee

MAILING ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIED ADDRESS:
Registration Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blue Island		-, LLC	
(Name of the Limi	(A Florida Limited Liabil	it/now appears on our records ity Company)	<u>r</u>)
The Articles of Organization for this Limited I Florida document number <u>L/600//87</u>	_	e filed on $10/10/2$	016 and assigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, <u>enter the new name c</u>	of the limited liability	company here:	
	-		
The new name must be distinguishable and contain the	words "Limited Liability Co	ompany," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		17 SE 17
(Principal office address MUST BE A STRE)	ET ADDRESS)		
Enter new mailing address, if applicable:			-2 MI
(Mailing address MAY BE A POST OFFICE			20 Ω ω
			, 0
B. If amending the registered agent and registered agent and/or the new registered on Name of New Registered Agent:	office address here:	address on our records,	, enter the name of the new
New Registered Office Address:	6141 DO	negal Dr.	
	Or laina	Ehter Florida street address , Flo	rida 328/9 Zip Code
		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

Title	Name	Address	Type of Action
MGR	Micaela Baptista	6141 Donegal Dr.	
		Orlando, FC 32819	☐ Remove
			hange
			
			Remove
			Change
			
			□ Remove
			Change
			□ Remove
			Change
 -			Add
			C Remove
			□ Change
			
			□ Remove
			Change

/ V / //	
	· · · · · · · · · · · · · · · · · · ·
	HASSE -
	». <u>≃</u>
ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to	o date of filing or more than 90 days after filing.) Pursuant to 605
If the date inserted in this block does not meet the applical iment's effective date on the Department of State's records.	ble statutory filing requirements, this date will not be liste
ecord specifies a delayed effective date, but not ne 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlie
,	
a 9/21/2017 . 2017	

Page 3 of 3

Filing Fee: \$25.00