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2021 SEP 28 PM 12: 4.8

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COVER LETTER

Division of Cor	rporations		
Bluestone	tv'ilig	. •	
SUBJECT:			
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Alexander Danilov		
		Name of Person	
	BLUESTONE EV LLC		
		Firm/Company	_
	685 NW 4TH AVE		
		Address	
	FORT LAUDERDALE, F	1, 33311	
		City/State and Zip Code	
	murphybedsfl@gmail.com		
	E-mail address: (to be used for future annual report notifi	ication)
for further information c	oncerning this matter, please ca	all:	
Alexander Danilov		305 4963673	
		at () Area Code Daytime	
Name o	l'Person	Area Code Daytime	Telephone Number
inclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	<u>s:</u>	Street Address:	

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

TO:

Registration Section

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

BLUESTONE LV LLC

2021 SEP 28 PM 12: 48

(Name of the Limited Liability Company as it now appears on our!records) ASSET TO The Articles of Organization for this Limited Liability Company were filed on ______ and assigned 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 City

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 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	Maksim Tabunou	2570 NE 209th Terrace, Miami, Fl 33180	= 4.4.4
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ective date, if other than the reffective date is listed, the date mater If the date inserted in this brument's effective date on the I	lock does not meet the	applicable statu	filing or more than ⁹ tory filing require	(optional) days after filing.) Ponents, this date wi	rrsuant to 605.020 If not be listed a:
cord specifies a delayed effecti s tiled.	ve date, but not an effe	ctive time, at 12	:01 a.m. on the ea	lier of: (b) The 9	0th day after the
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	Signature of a member	William Control wood	acontains at a man	hor	