## <u>LIJ 0001 32379</u>

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

Division	on of Corporations	
Blu SUBJECT:	lue Sky CSN 9300 LLC	
SOBJECT:		
<b>\_</b>		
The enclosed Art	rticles of Amendment and fee(s) are submitted for filing.	
Prese return all o	correspondence concerning this matter to the following:	
	Preston O. Cockey, Jr.	
	Name of Person	
	Preston O. Cockey, Jr., P.A.	
	Firm/Company	
-	110 E. Madison Street, Suite 204	
	Address	
	Tampa, FL 33602	
	City/State and Zip Code	
	david@rattner.us	
	E-mail address: (to be used for future annual report notification)	
For further inform	rmation concerning this matter, please call:	
David T. Rattner	er 239 246-1716 at ( )	
Name of Person Area Code Daytime Telephone Number		_
Enclosed is a che	eck for the following amount:	
<b>■</b> \$25.00 Filing	rig Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee & \$\Bigcup	Status &

MAILING ADDRESS:

TO:

Registration Section

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

Blue Sky CSN 9300 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 June 16, 2017 and assigned brida document number L17000132379

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Enter new principal offices address, if applicable:	14194 Reflection Lakes Drive	
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers, Florida 33907	
Enter new mailing address, if applicable:	14194 Reflection Lakes Drive Fort Myers, Florida 33907	

B. If amending the registered agent and/or registered office address on our records, enter the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Blue Sky Holdings, Inc.

14194 Reflection Lakes Drive

Enter Florida street address

Fort Myers

Fort Myers

Fort Myers

Fort Myers

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 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
MGR	Blue Sky Holdings, Inc.	14194 Reflection Lakes Drive	<b>■</b> Add
		Fort Myers, FL 33907	□ Remove
			□ Change
MGMR	David T. Rattner Trust	996 Wittman Drive	□ Add
•		Fort Myers, FL 33919	■ Remove
_			☐ Change
MGR	Blue Sky Holdings Growth 2, LLC	996 Wittman Drive	□ Add
		Fort Myers, FL 33919	■ Remove
			Change
			Add
			Remove
			☐ Change
			□ Add
			Remove
			Change
			Add
			☐ Remove
			□ Change

real property, and to engage in all other businesses permitted under Chapter	605, at the direction of the Mar	nager.
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effective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing or not listed in this block does not meet the applicable statutory filing.	(optional) nore than 90 days after filing.) Pursu	ant to 60
ment's effective date on the Department of State's records.	ig requirements, this date will be	ot oc na
ecord specifies a delayed effective date, but not an effective	time at 12:01 a.m. on th	e earli
ne 90th day after the record is filed.	<b>,</b> ac <b>2</b> 2.02 a	
August 21 2017		

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Typed or printed name of signee

Filing Fee: \$25.00