## U17000 155755

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> S. WARREN SEP 15 2017

## COVER LETTER

TO: Registration Sec Division of Corp			
Blueprints P	DQ. LLC		
SUBJECT:	Name of	Limited Liability Company	
The enclosed Articles of A	 Amendment and fee(s) are 	submitted for filing.	
Please return all correspon	ndence concerning this ma	tter to the following:	
	Steven Rudd		
		Name of Person	<del></del>
	Eagle Metalworx		
		Firm/Company	<del> </del>
	497 Serenoa Rd, Unit		
		Address	
	Santa Rosa Beach, FL	1 32459 	
	- 1 - 2	City/State and Zip Code	
	Sales a pac	ss. (to be used for future annual report	notification)
For further information co	oncerning this matter, plea		
Steven Rudd			-2009
Name of	Person	Area Code Da	vtime Telephone Number
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Statu	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Registra Division P.O. Bo	NG ADDRESS: attion Section of Corporations ox 6327 ssec, FL 32314	Registration Se Division of Co Clifton Buildir	rporations ng e Center Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blueprints PDO, 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  $\frac{7/20/2017}{}$ and assigned Florida document number L17000155755 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Eagle Metalworx, LLC 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: (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 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

If Changing Registered Agent, Signature of New Besistered

Page 1 of 3

company has been notified in writing of this change.

	from our records:	1	
MGR = N AMBR = A	lanager Authorized Member		
<u> Fitle</u>	<u>Name</u>	Address	Type of Action
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			Change
			□ Add
			Remove
			□ Change
			\_ Add
			☐ Remove
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G •	, enter change(s) here: (Attach additional sheets, if necessary.)
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If the date inserted in this block d	does not meet the applicable statutory filing requirements, this date will not be
ent's effective date on the Departi	ment of state's records.
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