

L17000216645

Florida Department of State
Division of Corporations
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Division of Corporations
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Fax Number : (954) 474-9850

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BLUEWATER MANAGEMENT USA LLC

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Corporate Filing Menu

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K. SALY

OCT 30 2017

H17000283627 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
2017 OCT 27 AM 9:55
ARTICLE 605

BLUEWATER MANAGEMENT FUSA 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 Oct. 19, 2017 and assigned
Florida document number L17000216645.

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 "L.L.C."

Enter new principal offices address, if applicable:

750 W. Sunrise Blvd.

(Principal office address MUST BE A STREET ADDRESS)

Fort Lauderdale, Fl. 33311

Enter new mailing address, if applicable:

750 W. Sunrise Blvd.

(Mailing address MAY BE A POST OFFICE BOX)

Fort Lauderdale, Fl. 33311

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, Florida

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

H17000283627 3

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>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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11 F.L.

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

100

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date is inserted in this block, it must be in the format of MM/DD/YYYY.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated

10/26/17.

W. Lerner

Signature of a member or authorized representative of a member

Jay Lasner

Typed or printed name of signee