2018-04-09 16:27:09 (GMT)

13055138605 From: Eli Panell Page 1 of 1

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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

Eron:

Account Name : PANELL LAW GROUP, LLC

Account Number : 120130 00008 Phone : (305)533-8606 Fax Number : (305)513-8605

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BLUE ENERGY CV LLC

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COVER LETTER

TO:	Registration Sec Division of Corp					
SUBJ		RGYCV,LLC	•	18 1 19		
SOBJ	EC1;	Name of Lim	ited Liability Company			
The on	nelosed Articles of A	mendment and fee(s) are sub-	Submitted for filing. ter to the following: PA,CFP,LL,M Name of Person ORTIZ,PLLC Firm/Company SUITE 425 Address City/State and Zip Code s: (to be used for future annual report notification) o call: 305 313-8606 at (Area Code) Daytime Telephone Number			
Please	return all correspon	dence concerning this matter	to the following:			
		ELIPANELI,ESQ.,CPA		6. 5 - 34 - 46.		
			Name of Person	and the second s	-angular up angula a Amerikara u	
		WERMUTHPANELLOR	TIZ,PLLC			
			Firm/Company			
		8750NW36STREET.SUITE425				
			Address			
		DORAL,FL33178				
		· · · · · · · · · · · · · · · · · · ·				
		ELI@WPOLAW.COM	o be used for future and	iual report notificat	ion)	
For fu	rther information co	ncerning this matter, please or	المهدي فيبي	interest of the control of the contr	·	
	ANELL,ESQCP/		305			
www.traund-trau	Name of	Person		Daytime Te	lephone Number	
Enclos	sed is a check for the	: following amount:		•		
■ \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	<i>i</i>	Certificate of Status & Certified Copy	
	Registra	NG ADDRESS: tion Section t of Corporations	Regis Divis	stration Section sion of Corporatio		

2661 Executive Center Circle Tallahassee, Ff. 32301

Tallahassee, FL 32314

To: Page 6 of 8

2018-04-09 16:27:09 (GMT) (((H18000069999:3)))

13055138605 From: Eli Panell

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLUEENERGYCV,LLC	Distribution Commen			
(Name of the Limite	A Florida Limited	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Lia	ibility Company	were filed on DECEMBER11,201	and assigned	
Florida document number L17000252226	-			
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:	A - 9 -	
The new name must be distinguishable and contain the wo	ords "Limited Liabi	hiy Company," the designation "LLC" or		
Enter new principal offices address, if applica	ble:	e/oWERMTUHPANELLORTIZ	LPLIC 2	
(Principal office address MUST BE A STREET		8750NW36STREET,SUITE42:	2013	C++15[]
	<u> </u>	DORĂĹ,FL33178		
Enter new mailing address, if applicable:		c/oWERMTUHPANELLORTIZ,PLLC		
(Mailing address MAY BE A POST OFFICE I	BOX)	8750NW36STREET,SUITE42	5	
		DORAL,FL33178		
B. If amending the registered agent and/or registered agent and/or the new registered off			nter the name of the no	<u>ew</u>
Name of New Registered Agent:	WERMUTH P.	ANELL & ORTIZ, PLLC		
New Registered Office Address:	8750 NW 36TI	H STREET, SUITE 425		
		Enter Florida street address		
	DORAL	, Florid	la <u>33178</u>	
		City	ZipCode	
New Registered Agent's Signature, if changing R	egistered Agent:			
I hereby accept the appointment as registered	l agent and agr	ee to act in this capacity. I furthe	er agree to comply with th	he

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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.

To: Page 7 of 8

2018-04-09 16:27:09 (GMT) (((H18000069999 3)))

If amending Authorized Person(s) authorized to manage, enter the fitle, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CAMILO ALBERTO VARGAS ECHANDIA	c/o WERMUTH PANFLL ORTIZ, PLEC	
		K750 NW 36 STREET, SUITE 425	☐ Remove
		DORAL, FL 33178	■ Change
MGR	MARIA LUCIA GOMEZ NAVAS	e/o WERMUTH PÄNELL ORTIZ, PLLC	🗖 Add
		8750 NW 36 STREET, SUITE 425	□ Remove ′
		DORAL, FL 33178	Change .
			B Add C
			The Finance
			© Charge
***************************************		9A-	Add
	•	} :	☐ Remove
			□ Change
		5 3/15 C	□ Ađd
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change

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<u>.</u>	
Iffective 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.) Prusuant to 605.0207 (3)(b) 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.	
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the record is filed.	
Dated February 19 . 2018	
Elle Cury	٠.,
Signature of a member of authorized representative of a member	
CAMILO ALBERTO VARGAS ECHAMBIA	,

Page 3 of 3

Filing Fee: \$25.00

850-617-6381

3/13/2018 9:20:30 AM PAGE 1

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March 13, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BLUE ENERGY CV LLC 2232 NW 87 AVE DORAL, FL 33172

SUBJECT: BLUE ENERGY CV LLC

REF: L17000252226

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filling of your document, please call (850) 245-6051.

Stacey M Warren Regulatory Specialist II FAX Aud. #: H18000069999 Letter Number: 818A00004998

...:

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DEPARTMENT OF STATE

DIVISION OF CORPORATION

TALL AHASSEE. FLORIST

TALL AHASSEE. FLORIST

P.O BOX 6327 - Tallahassec, Florida 32314

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