## 117000 261372

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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## **COVER LETTER**

	gistration Se vision of Cor				
eun iver		ECT PROPERTIES LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please returi	n all correspo	ondence concerning this matter	to the following:		
		MARLA COPELAND ES	TY	•	٠٠٦ • • • • • • • • • • • • • • • • • • •
			Name of Person		(== -
		EASY TAX AND ACCOU	UNTING SERVICES	•	<u> </u>
			Firm/Company	:	· > 1
		P O BOX 2066			£.
		<del></del>	Address		- · · · ·
		HIGH SPRINGS FL 3265	5		
			City/State and Zip Code		
		easytax@windstream.net			
10a – Bondla oo l			to be used for future annual report no	tification)	riling Fee, ate of Status &
		oncerning this matter, please ca			
MARLA C	OPELAND E	ESTY	386 454-8959 at ()		
	Name o	f Person	Area Code Daytii	ne Telephone Number	
Enclosed is	a check for th	ne following amount:			
■ \$25.00 I	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status & Copy
	Registr Divisio P.O. Be	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	enter Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B&D SELECT PROPERTIES LLC		
( <u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our records. .imited Liability Company)	)
The Articles of Organization for this Limited Liability Co Florida document number $\frac{L17000261372}{L17000261372}$	mpany were filed on 12/26/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
BLAIR ENTERPRISES LLC		
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRE	ESS	
		, <u>, , , , , , , , , , , , , , , , , , </u>
Enter new mailing address, if applicable:		$\rightarrow$ $\rightarrow$
Mailing address MAY BE A POST OFFICE BOX)		<del></del>
manny waters mill be ni voje vi i ree pony		
3. If amending the registered agent and/or registe egistered agent and/or the new registered office addre		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Flor	rida
	City	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

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

MGR = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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fective date, if other than the date of filing:	or to date of filing or mo	ore than 90 days after	tīling.) Po	ursuant to 605.
ote: If the date inserted in this block does not meet the applicament's effective date on the Department of State's record		requirements, this	s date wil	Il not be liste
record specifies a delayed effective date, but n The 90th day after the record is filed.				the earlie
	1			
ted 6/11 2019  William B Gl  Signature of a member or aut	•			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00