L18000 103300

(Reque	estor's Name)	
(Addre	ess)	_
(Addre	ess)	
(City/S	state/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nam	e)
(Docum	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	-

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R. WHITE. FEB 17 2020

COVER LETTER

	gistration Se vision of Cor		r				
CUDIECT.		GENERAL CONTRACTOR	RS LLC				
SUBJECT:	*	Name of Lim	ited Liability Com	pany			.
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		GIANAMAR QUINTANA	A DE TORRES				
	Name of Person						
	BLUEMAR CONSTRUCTION LLC						
	Firm/Company 421 NE 18TH AVENUE Address						
							
POMPANO BEACH, FL 33060							
			City/State and 2	Sip C	ode	<u> </u>	
		GTORRES@NEWTECH		<u>,</u>			
For further i	nformation e	h-mail address: (oncerning this matter, please c	(to be used for futu: call:	re am	iual report not	ification)	
		IA DE TORRES	954		464-4087		
	Name o	f Person	at (Area C		Daytin	ie Telepho	one Number
Enclosed is	a check for th	ne following amount:					
\$25.00 1	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Fil Certified (additional)	Copy	Y'		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	uling Addres gistration S				et Address:	ection	
	-	Corporations		Registration Section Division of Corporations			
	D. Box 632				Centre of		
1 a	llahassee, l	FL 34314		441.	J IN, IVIORIC	ic ottee	t, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2320 C 121 PM 2: 42

BLUEMAR GENERAL CONTRACTORS 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 C	ompany were filed on 04/2	4/2018	and assigned
Florida document number L18000103300	<u>_</u> ·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here	2:	
BLUEMAR CONSTRUCTION LLC			
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the des	ignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:			<u></u>
(Principal office address MUST BE A STREET ADDR	RESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered	d office address on our rec	ords, <u>enter the nam</u>	e of the new registered
agent and/or the new registered office address here:			
M. CM. B.: IA			
Name of New Registered Agent:		·	
New Registered Office Address:			
	Enter Florid	a street address	
		, Florida	
			Zip Code
New Registered Agent's Signature, if changing Registere	d Agent:		
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performance of n gent as provided for in Ch	ny duties, and I am j papter 605, F.S. Or,	familiar with and if this document is
	If Changing Registered Agen	it, <u>Signature of New Re</u> j	gistered 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>	Name	Address	Type of Action
			\ \ \ \
			□Remove
			Change
			□∧dd
			□Remove
			☐Change
			
			□Remove
			☐ Change
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E <i>ff</i>	sing data. If other there also date of City and
(If an el <u>Note:</u>	tive date, if other than the date of filing:
ne reco ord is f	and specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ided.
Dated	JANUARY 14TH
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00