## 118000122744

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DATE: 12/7/21

NAME: BLUE TORTOISE DIGITAL, LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE Q Hodge

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blue Tortoise Digital, LLC	<u> </u>	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document numberL18000122744  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liab		and assigned
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5500 North Military Trail, #547	
(Principal office address MUST BE A STREET ADDRESS)	Boca Raton, FL 33496	<del>_</del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5500 North Military Trail, #547 Boca Raton, FL 33496	2011
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	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.

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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
_MGR_	SCHNURR, DONALD	5500 North Military Trail, #547	□Add
		Boca Raton, FL 33496	□Remove
			<b>ॉ</b> Change
_MGR	SCHNURR, MARTHA	5500 North Military Trail, #547	□ Add
		Boca Raton, FL 33496	Remove
			<u></u> <b>⊡</b> Change
			□Adđ
			Remove
			□Add
			Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change

ii amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
-	
(If an effective on Note: If the	te, if other than the date of filing:
ne record spec ord is filed.	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	<u>December 6</u> . <u>2021</u> .
	Don Schnur
	Signature of a member or authorized representative of a member
	Donald Schnurr

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