

L18000200150

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

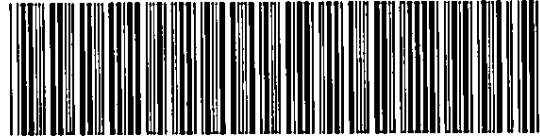
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/27/18--01020--008 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 SEP 27 AM 7:25

N COOPER

OCT 01 2018

CSC – NCH – IFF

TO: PHYSICAL: Dept. of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING: Dept. of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

FROM: National Corporate Headquarters, Inc.
5605 Riggins Court Suite 200
Reno NV 89502
(800) 638-2320
(775) 329-0852

DATE: Tuesday, September 18, 2018

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

- Articles of Amendment to Articles of Organization
For **BLUE FIN POOL AND SPA, LLC**

We have included payment in the amount of \$25.00 for the following fees:

- Amendment

We have included one original

If there are any questions, please call 800-638-2320

Please return the file stamped copy of the Articles to the address below:

Processing Department
5605 Riggins Court Suite 200
Reno NV 89502

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BLUE FIN POOL AND SPA, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Processing Department

Name of Person

Firm Company

5605 Riggins Court Suite 200

Address

Reno, NV 89502

City State and Zip Code

docs@incauthority.com

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Processing Department

Name of Person

at (800) 638-2320

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6227
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BLUE FIN POOL AND SPA, 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 08/21/2018 and assigned Florida document number L18000200150.

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:

(Principal office address MUST BE A STREET ADDRESS)

2550 SW 117th Way

Miramar, FL 33025

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2550 SW 117th Way

Miramar, FL 33025

18 SEP 27 AM 7:25

SECRETARY
DIVISION OF REVENUE

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

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.

If Changing Registered Agent, Signature of New Registered 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Anthony L. Weems	2550 SW 117th Way	<input type="checkbox"/> Add
		Miramar, FL 33025	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

18 SEP 27 AM 1:23

18 SEP 27 AM 7:25

SECRETARY OF STATE
DIVISION OF COMMERCE

(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 (5)(b)

If the record 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 record is filed.

Dated September 12, 2018.

Signature of a member or authorized representative of a member

Anthony L. Weems

Typed or printed name of signee