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COVER LETTER

Division of Cor	porations			
SUBJECT: Blue	FREE Soluti	iDAS nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Payl	Name of Person		
	Blue T	REE SOLY FIONS		
		WE Miany (+		
	Mian	City/State and Zip Code		23 -
	01 12 6	City/State and Zip Code		
	E-mail address: (to be used for future annual report notif	ication)	F 3 7
For further information co	oncerning this matter, please c			F8 5: 21
<u>tani</u>	HCIII	at 78b 278 - Daytime	9067	5: 21
Name of	Person	Area Code Daytime	Telephone Number	i
Enclosed is a check for the	e 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 For Certificate of Societified Copy tadditional copy is	Status &
MAILI	NG ADDRESS:	STREET/COURIE	ER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

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



January 8, 2019

PAUL HALL BLUE TREE SOLUTIONS 13841 NE MIAMI CT MIAMI, FL 33161

SUBJECT: BLUE TREE SOLUTIONS "LIMITED LIABILITY COMPANY

Ref. Number: L18000266910

We have received your document for BLUE TREE SOLUTIONS "LIMITED LIABILITY COMPANY and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

I'm not sure what you are doing. You must put the actual name of the LLC at the top of the page. If you are amending the LLC name you put the new name in Section A. You list the additions or deletions on page 2 of the application. Please make the proper corrections and return the document for filing.

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 filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 319A00000519

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLUE TREE SOLUTIONS "LIMITED LIABILITY COMPANY (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 ____ Florida document number L\8 000 2669 10. 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the ne registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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 ac or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		Miami, FL 33161	Remove
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Filing Fee: \$25.00