190000021021

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(Address)	
(Address)	
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Amend

JAN 1 1 2020 I ALBRITTON

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
CUBICO	asiness Group LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	Richard Blackwell		
		Name of Person	
	Ric Blackwell Law PA		
		Firm/Company	
	106000 Chevrolet Way, Su	tite 212	
		Address	•
	Estero, FL 33928		
		City/State and Zip Code	***
	ric@ricblackwelllaw.com	to be used for future annual report not	
For further information e	oncerning this matter, please ca		ancation)
Richard Blackwell		239 240-7764	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	antion.
Registration S Division of C		Registration Se Division of Co	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BlueSky Business Group, LLC			
(Name of the Limited Liability Comps (A Florida Limited	nny as it now appears on our reco Liability Company)	rds.)	
The Articles of Organization for this Limited Liability Company Florida document number L19000021021	were filed on 1-18-2019	and assigned	
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "Ll	.C" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		•	
(Principal office address MUST BE A STREET ADDRESS)		ZO SECONO	
		湯る「	
Enter new mailing address, if applicable:	-		
(Mailing address MAY BE A POST OFFICE BOX)		30	
		99 7	
		£:-	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ente</u>	er the name of the new register	
Name of New Registered Agent:	***		
New Registered Office Address:			
	Enter Florida street address		
	- -	Florida	
	City	гір Соае	

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>	Address	Type of Action
MGR	Timothy Bellon	8890 TERRENE COURT, SUITE 103	
		Bonita Springs, FL 34135	□Remove
			□Change
			□Add
			Remove
			□Change
			🗆 Add
			Remove
			□Change
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Note: If		his block does no	ot meet the applic	able statutory filir		tional) ier filing.) Pursuant to 60 his date will not be fis	
document				st an affactive	Name -		lier n
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he recor The 90		e record is Me	2019	<u> </u>		a.m. on the ear	iiei o
he recor The 90	oth day after the	e record is Me	2019	orized representative		a.m. on the ear	ner o

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Filing Fee: \$25.00