

L190000 55350

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

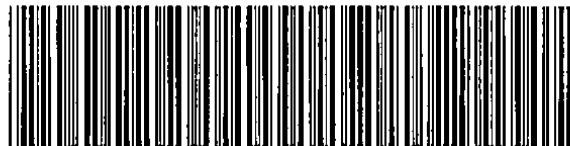
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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AUG 16 2019

S. YOUNG

FILED
19 AUG 12 AM 7:05
STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BlueShine 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:

LI - NA SU

Name of Person

BlueShine LLC

Firm/Company

800 Indus Road

Address

Venice, Florida 34293

City/State and Zip Code

Larryoch@yahoo.com

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

For further information concerning this matter, please call:

LI - NA SU

941

565-4681

at (_____) _____

Name of Person

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 6327
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**

BlueShine 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 2-26-2019 and assigned
Florida document number L19000055350

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

BlueShine LLC (same name)

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)

LI - NA SU OWNER/ title Mgr

800 Indus Road

Venice, Florida

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Larryoch@yahoo.com (same email address)

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:

Same Registered Agent (LI - NA SU)

New Registered Office Address:

SAME (800 Indus Road , Venice, Florida 34293)

Enter Florida street address

venice

Florida 34293

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.

LI NA SU

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Hello and good DAY. We are switching the owner ship from: Lawrence J Och (mgr) TO LI - NA. SU.

We thank you for your help in switching this owner ship paperwork.

Lawrence J OCH will be signing as old owner\ title manager

AND

LI - NA. SU will be signing as new owner / title manager

*** Every name will be under LI - NA SU for this paper work and company.

thankyou for your time. GOD BLESS !!!!

8 - 5 - 2019

E. Effective date, if other than the date of filing: _____ (optional)

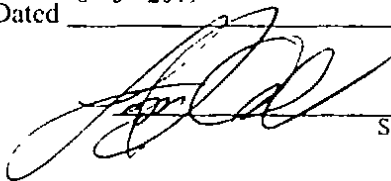
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 8 - 5 - 2019



Signature of a member or authorized representative of a member

LI NA SU

Lawrence Och (OLD owner) LI - NA. SU NEW OWN

Typed or printed name of signee