L19000127459

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	•
· Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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JAN 1 0 2022

I ALBRITTON

January 6, 2022

CAPITAL CONNECTION, INC.

SUBJECT: BLUE WATER INVESTMENTS ENTERPRISES III, LLC

Ref. Number: L19000127459

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must also contain the address of the registered agent which must be at a Florida street address.

The registered agent must sign accepting the designation.

The document must have original signatures.

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.

Irene Albritton
Regulatory Specialist III

Letter Number: 822A00000362

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Blue Water Investments Enterprises III, LLC	
	1
	Art of Inc. File
	•
	LTD Partnership File
	Foreign Corp. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
- 	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Name Date Time	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

TO: Registration S Division of Co			
BLUE W.	VTER INVESTMENTS ENTER	OPRISES III, LLC	
BUNDELL	Name of Lin	sited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sut	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		ELIO AGUAYO JR	
		Name of Person	• • •
	BLUE WATER INVES	STMENTS ENTERPRISES II	I, LLC
		Firm/Company	
	1813 SW 150 PLACE		
		Address	• • • • • • • • • • • • • • • • • • • •
	MIAMI, FL	33185	
		City/State and Zip Code	
	, - ,	@hotmail.com	-
		to be used for future annual report in	olitication)
rar turther information	concerning this matter, please c		
ARGELIO AGUAYO) JR	at (_786) 740-333	ime Telephone Number
Name	of Person	Area Code Days	ime Telephone Number
Enclosed is a check for	the following amount:		
☐ \$25.00 Filing Fee	S30,00 Fifing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of (P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration S Division of C The Centre of 2415 N. Mon Tallahassee, I	orporations Tallahassee roe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLUE WATER INVESTMENTS ENTERPRISES III, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Commany)

(A) WARE	Same Constity Confidency
The Articles of Organization for this Limited Liability Co	unpany were filed on 05/10/2019 and assigned
Florida document number L19000127459	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR.	<u>ESSS)</u>
	<u> </u>
	;
Enter new mailing address, if applicable:	1.
(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 new registered
agent and/or the new registered office address here:	the same same same same and the manne of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	•
New Registered Agent's Signature, if changing Registered	Agent
provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag	and agree to act in this capacity. I further agree to comply with the implete performance of my duties, and I am familiar with and ent as provided for in Chapter 605, F.S. Or, if this document is I office address, I hereby confirm that the limited liability
	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

Title	<u>Name</u>	Address	Type of Action
MGR	ARGELIO AGUAYO JR		(TAdd
			Filtemove
			::::::::::::::::::::::::::::::::::::::
MGR	LUIS C SOSA	13050 NW 43RD AVENUE	
		OPA LOCKA, FF. 33054	□Remove
			[]Change
			Cladd
		····	[]Remove
		, . 	
			(IRemove
		· · · · · · · · · · · · · · · · · · ·	
			DAdd
			ElRemove
		-	HChange
			□Remove
			C) Change

please add EiN: 85-0650:		
		•

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		—
	N. C.	
vetive date, if other than	ar date of filing: Locational)	
effective date is listed, the date	ne date of filing:	o 605,02
te: If the date inserted in this	block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	a listed
anche s checare and the the	Department of State S records.	
cord specifies a delayed effe s filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of; (b). The 90th day	after th
S meta.		
January 03	2()22	
ed	2022	
	.07	
	181 Argelio Aguayo JR. Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	
ARGELIO AGUAY) IR	
	Typed or printed name of signoc	

Filing Fee: \$25.00