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(Re	questor's Name)			
(Ad	ldress)			
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(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
(Do	cument Number)			
Certified Copies	Certificates	s of Status		
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Special Instructions to	Filing Officer:			
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Blue Water Catevina LC 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:
HEATHER CARRAWAY Name of Person
Blul Water Catenna UC
5408 11-10 Ave W.
Bradenton R 341209
City State and Zip Code H-PO-H-P-V
For further information concerning this matter, please call:
HEATHER COMMINANT at (380), AUG-4180 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status □ \$30.00 Filing Fee Certified Copy (additional copy is enclosed) □ \$30.00 Filing Fee 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

<u> </u>	CARMO UC ability Company as it now appears on our records.)	
(A Fle	orida Limited Liability Company)	
The Articles of Organization for this Limited Liabilit	ty Company were filed on 51519 and assigned 52.7	
This amendment is submitted to amend the following	g:	
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 "L.L.C." or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	<u></u>	
(Principal office address MUST BE A STREET AL	ODRESS)	
Enter new mailing address, if applicable:		<u>.</u> .
Mailing address MAY BE A POST OFFICE BOX,		,
		 be
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records, enter the name of the ne address here:	W
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City Zip Code	
Now Registered Agent's Cianature of changing Regist	torad Agent:	

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>	Name	Address	Type of Action
AMBR CO- OWNEY)	Heather Carraway	540B 11th Ave W	X ∧dd
owner)		Bradenton Fl 3421) ☐ Remove
			Change
			□ Add
			□ Remove
			Change
			Remove
			Add Add
			DAdd
		 	Remove
			Change
			□ Add
			□ Remove
			Change
	· 		□ Add
			□ Remove
			☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
I want to make sure, I, Heather Carraway
and Jim Howell are Usted as no owners
so we can both be added to a
business bank account; we were
instructed to fill an admendment
adding me as a "member", so
hopefully that is what we have
done hore
If you have any guestions pugge
Call 384 41010 4180
Thank you!
AISO WOWIG LIKE to add our EIN to ourse &
Listed Flyng.
EIN # 84-1871287
E. Effective date, if other than the date of filing: 15 15 20 9 (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 DO 18 20 9 Signature of a member or authorized representative of a member
HEATHER CAWAWAY Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00