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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

	distration Sedision, of Cor			•		
SUBJECT:	Blu Salmon	mon. LLC				
		Name of Lin	nited Liability Company			
The enclosed	Articles of .	Amendment and fee(s) are sub	omitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Lori Storey				
			Name of Person			
		Blu Salmon, LLC				
			Firm/Company			
		3 West Garden Street, Suite 705				
			Address			
		Pensacola, FL 32502				
			City/State and Zip Code			
		lori@blusalmon.com	to be used for future annual report notifi	ication)		
For further in	formation co	oncerning this matter, please ca	·	,		
Kramer A. L	itvak		850 432-9818 at ()			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed is a	check for th	e following amount:				
■ \$25,00 Fi	ling 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

Blu Salmon, LLC						
(Name of the Limi	ed Liability Compa (A Florida Limited I	iny as it now appears on clability Company)	our records.)			
The Articles of Organization for this Limited L. Florida document number L19000156319	iability Company	were filed on June 13	2, 2019	a	nd assi	igned
his amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name o	f the limited liab	oility company here:				
he new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the design	ation "LLC" or th	e abbrevia	tion "L.	IC.''
Enter new principal offices address, if applic	3 West Garden Stree	t, Suite 705				
Principal office address MUST BE A STREET ADDRESS) Pensacola, FL 32502					 	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	<u>BOX)</u>			SECRETARY OF	MA 8 1 AON 6102	
3. If amending the registered agent and registered agent and/or the new registered of			r records, <u>en</u>	teresthe i	ප	of the n
Name of New Registered Agent:	Teresa Dos Sar	ntos	 			
	New Registered Office Address: 3 West Garden		Limited Liability Company here: Second			
New Registered Office Address:	3 West Garden	Street, Suite 703				
New Registered Office Address:				·		

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

Title	<u>Name</u>	Address	Type of Action
MGR	Teresa Dos Santos	3 West Garden Street, Suite 705 Pensacola, FL 32502	Add
			□ Remove
			■ Change
MGR	Lori Storey	3 West Garden Street, Suite 705 Pensacola, FL 32502	Add
			☐ Remove
			■ Change
			☐ Remove
			Change
			Add
			☐ Remove
			Change
			Remove
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Effective	date, if other than the date of filing:(optional)	
(If an effective Note: If the	ve 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 60: the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list	5.02 ted
	's effective date on the Department of State's records.	
the record	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earli	ier
) The 90	Oth day after the record is filed.	
Dated	November 12 2019.	
	\sim	
	November 12 2019. The Aforem Signature of a member or authorized representative of a member.	

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Filing Fee: \$25.00