## Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	Division of Corporations	1.1
	Fax Number : (850)617-6383	- 3
C		-
From:	Account Name : REGISTERED AGENTS INC.	
	Account Number : I20090000081	υ.
	Phone : (307)200-2803	Žy s v
	Fax Number : (855)330-1010	<u>.</u>

annual report mailings. Enter only one email address please.\*\* Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 360BLU, LLC

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Corporate Filing Menu

C. BRUMBLEY
DEC 2 8 2021
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Electronic Filing Menu

## ' ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

360BLU, LLC		
(Name of the Limited Liabili	ity Company as it now appears on our record a Limited Liability Company)	<u>(s.</u> )
(2) 1 101146	2 Elimica Emonity Company,	
The Articles of Organization for this Limited Liability C	Company were filed on 07/10/19	and assigned
Florida document number L19000178334		
Florida document humber	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC	" or the abbreviation "L"
		210
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	2
		= -
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		N
1. The state of th		
B. If amending the registered agent and/or registere	d office address on our records, enter	the name of the new registered
agent and/or the new registered office address here:	, <del></del>	
Name of New Registered Agent:		
<del></del>		
New Registered Office Address:	Enter Florida street addres.	
	Liner Florida Siree daares.	
		orida
	City	Zip Code
New Registered Agent's Signature, if changing Registere	ed 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	HENDERSON GATES, LLC	7901 4TH ST N STE 300	□Add
		ST. PETERSBURG, FL 33702	⊠Remove
			□ Change
MGR	Sean A Dickerson	7901 4TH ST N STE 300	□Add
		ST. PETERSBURG, FL 33702	⊠Remove
			□ Change
AMBR	Rainmaker Millennial Group, LLC	7901 4TH ST N STE 300	&Add
		ST. PETERSBURG, FL 33702	🗆 Remove
			□Change
			□Add
			Remove
			🗖 Add
			□Remove
			🗆 Change
			□Add
			□Remove
			□ Change

C .	enter change(s) here: (Attach additional sheets, if necessary.)
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11-	
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Effective date, if other than the date of an effective date is tisted, the date must be a Note: If the date inserted in this block of document's effective date on the Depart	e of filing:
record specifies a delayed effective dat d is filed.	te, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated December 23	. 2021
	Rilay Park.
Sign	nature of a member or authorized representative of a member
Riley Park	

Filing Fee: \$25.00