

1/14/2021

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

L19000243910

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

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : BARINAS & ASSOCIATES INC.
Account Number : I20000200082
Phone : (305)871-0889
Fax Number : (305)870-9623

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

2021 JAN 15 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BLUE & WHITE DIAMONDS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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Corporate Filing Menu

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1/19/21

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLUE & WHITE DIAMONDS, 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 09/26/2019 and assigned
Florida document number L19000243910

This amendment is submitted to amend the following:

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

THE MILF'S HOMES LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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.

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
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TALLAHASSEE, FL

SECRETARY OF
TREASURY

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CLERK OF DISTRICT COURT
TALLAHASSEE, FL

Dated June 14, 2021

Typed or printed name of signer