19-Jan-2024 17:37 Unknown 9545960353 p.1



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

(((H240000144903)))



H240000144903ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : AA EXPRESS SERVICES INC

Account Number : I20230000057 : (954)596-0323 Phone Fax Number : (954)596-0353

**Er	nter	the	email	address	for	this	busin	ess	entity	to	bе	used	for	futi	ure	í
	an	nual	repor	t mailin	gs.	Enter	only	one	email	add	res	s ple	ase.	** =)
																ı

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FR **BLUE EAGLE HOUSE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Monu — Corporate Filing Menu

HEIPLEMIEUX JAN 23 2024

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H24000014490 3)))

BLUE EAGLE HOUSE LLC	
(Name of the Limited Liability Comp (A Florida Limited	nany as it now appears on our records.) I Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1.20000039968	y were filed on 02/03/2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
N/A	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON) B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	e address on our records, enter the name of thosew registers of the state of the st
	Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>t:</u>
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as heing filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

19-Jan-2024 17:38 Unknown 9545960353 p.3

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	(((H24000014490 3)))
AMBR = Authorized Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ANA MARIA AUAD FACCUSE	967 AZURE LANE WESTON FL 33326	□Add
			=Remove
			□Change
			□Remove
			□Change
			□Remove
			☐ Change
			
			□Kemove
			TChange
			JAdd
			BRemove
]Change
			□Remove
			□Change

19-Jan-2024 17:38 Unknown 9545960353 p.4

(((H24000014490 3)))

_	
-	
-	
_	
-	
-	
•-	
٠.	
_	
-	
_	
n eff ote:	ve date, if other than the date of filing: cetive 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 605,020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
	d 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
	ed.
is fil	
is fil	_01/09/2024
ecore is fil ted	