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Amend

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TO: Registration So Division of Cor			
BLSM Rea	alty LLC		
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Morgan Hila		
		Name of Person	
	Woods, Weidenmiller, Mi	chetti & Rudnick, LLP	
		Firm/Company	
	9045 Strada Stell Court, 4	th Floor	
	<u></u> ,	Address	
	NAples/FL 34109		
		City/State and Zip Code	
	mhila8@gmail.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Morgan Hila		239 325-4070 at ()	
Name o	f Person		e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing 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 Addres Registration S	Section	Street Address: Registration Se	
Division of C	•	Division of Cor The Centre of T	
P.O. Box 632 Tallahassee, 1			e Street, Suite 810

Tallahassee, FL 32303

DocuSign Envelope ID: 50D9F5AE-2D83-4572-BE1C-95C6ED666545 **AKTICLE**

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLSM Realty, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)	
he Articles of Organization for this Limited Liability C	ompany were filed on 03/30/2020	and assigned
lorida document number L20000091924		_ ,
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limi	ted liability company here:	
he new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	ESS)	
		202
		ξ:
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		- 111
		I . —
		2
If amending the registered agent and/or registered gent and/or the new registered office address here:	office address on our records, enter the i	
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.

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In amending Authorized reison(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>	Type of Action
MGR	Steven Marano	16611 Firenze Way	≣ Add
		Naples, FL 34110	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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Effective date, if other than the fan effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the E	tock does not meet the app	nicable statutory filing i	(optional) e than 90 days after tiling requirements, this date) ;) Pursuant to 605,0207 (will not be listed as t
e record specifies a delayed effective is filed.	e date, but not an effective	e time, at 12:01 a.m. on	the carlier of: (b) TI	ne 90th day after the
	2020			
Dated		 '		
Dated June 16 Docusigned by: Robert Lincking	•			
1 10-01 (MODELIN	Signature of a member or au		a member	