

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

LA0000133158

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To: Division of Corporations
Fax Number : (850) 617-6363

From: Account Name : FOLEY & LARDNER
Account Number : 119980000047
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BIO BLAZE PARTNERS LLC**

Certificate of Status	0
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Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

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MAY 29 2020

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020 MAY 28 AM 9:48

BIO BLAZE PARTNERS 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 May 20, 2020 and assigned
Florida document number L20000133158

This amendment is submitted to amend the following:

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

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

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

City, Florida 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

2020 MAY 28 AM 9:48

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Kevin Collins	8419 Sunstate Street	<input checked="" type="checkbox"/> Add
		Tampa, Florida 33634	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Donald Biedrzycki, Jr.	8419 Sunstate Street	<input checked="" type="checkbox"/> Add
		Tampa, Florida 33634	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2020 MAR 28 AM 9:48

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

If the record 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 record is filed.

Dated May 28, 2020

- DocuSigned by:

Crest Creek

6007057873084C4

6007057873C84C4
signature of a member or authorized representative of a member

Curt P. Creely

Typed or printed name of signee

Filing Fee: \$25.00