## LZ0000221345

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	curnent Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	ly



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## **COVER LETTER**

O: Registration Se Division of Cor			
	→ E BLUE BUILDER LLC	*	•
UBJECT:	Name of Lim	ited Liability Company	
he enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
lease return all correspo	ndence concerning this matter	to the following:	
	JOHNSON W EUSTACH	E	
		Name of Person	
	HERITAGE BLUE BUIL	DER LLC	
		Firm/Company	
	4630 LIPSCOMB ST NE	STE 18	
		Address	
	PALM BAY FLORIDA 3	2905	
	SERVICE@DOCINTEAM	City/State and Zip Code .COM	
	·	to be used for future annual report not	ilication)
For further information c	oncerning this matter, please c	all:	
JOHNSON EUSTACHE		407 952-8749	
Name o	l'Person		ie Telephone Number
Enclosed is a check for th	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 Division of C P.O. Box 632	Section orporations	Street Address: Registration Se Division of Co The Centre of	rporations
Tallahassee, l			oe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3

HERITAGE BLUE BUILDER LLC	ny as it now appears on our records.)
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)
he Articles of Organization for this Limited Liability Company orida document number <u>L20000221345</u> .	
his amendment is submitted to amend the following:  . If amending name, enter the new name of the limited liab  //A	
ne new name must be distinguishable and contain the words "Limited Liabil nter new principal offices address, if applicable:	lity Company," the designation "LLC" or the abbreviation "L.L.C,"  4630 LIPSCOMB ST NE STE 5
Principal office address MUST BE A STREET ADDRESS)	PALM BAY FLORIDA 32905
nter new mailing address, if applicable:	4630 LIPSCOMB ST NE STE 5
Mailing address MAY BE A POST OFFICE BOX)	PALM BAY FLORIDA 32905
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent: JEAN L EUST	АСНЕ
New Registered Office Address: 4630 LIPSCOM	MB ST NE STE 20

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.

Cuv

PALM BAY

If Changing Registered Agent, Signature of New Registered Agent

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being added removed from our records:

IGR = Manager MBR = Authorized Member

<u>itle</u>	<u>Name</u>	Address	Type of Action
4GR	MICK FERJUSTE E	1510 SHAMROCK AVE PALM BAY FL 32909	<b>≣</b> Add
			□Remove
			Change
— <del></del>			□Add
			🗀 Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			🗆 Change
			🗆 Add
			Remove
			🗆 Change
			□Add
			□Remove
			□Change

- would fixe to add bite.K	FERJUSTE AS MANAGER ( MGR) IN THE LIST OF THE OFFICER .
·	
rational rate of the allege allegers	10/24/2020
ctive date, if other than t effective date is listed, the date (	the date of filing: (optional) must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02
If the date inserted in this	block does not meet the applicable statutory filing requirements, this date will not be listed a
iment's effective date on the	Department of State's records.
ord specifies a delayed effectiled.	ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
10/23	2020 //
d	·// <b>/</b> /
	// <b>/</b>
	Signature of a member or authorized representative of a member
	NN

Typed or printed name of signee