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Office Use Only



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R. SVH'TE FEB 1 \$ 2021

COVER LETTER

TO:

TO: Registration : Division of C	Section orporations *		.,	
	se Solutions, LLC		•	
SUBJECT:	Name of Lim			
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	Randolph Yerkes			
	 	Name of Person		
	One Rose Consulting, L	LC		
		Firm/Company		
	12207 Colony Lakes Blv	d.		
	· · · · · · · · · · · · · · · · · · ·	Address		
	New Port Richey, FL 340	654		
		City/State and Zip Code		
	randolph@1-rose.com			
	E-mail address: (to be used for future annual report no	tification)	
For further information	concerning this matter, please c	all:		
Randolph Yerkes		727 291-0790		
Name	e of Person	at () Area Code Daytii	ne Telephone Number	
Enclosed is a check for	r the following amount:			
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Fiting Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addi		Street Address:		
Registration Section Division of Corporations		Registration S Division of Co		
P.O. Box 6.	•		Division of Corporations The Centre of Tallahassee	
Tallahassee	e, FL 32314	2415 N. Mon r	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blue Rose Solutions, LLC

3 2. 0 111 FT 1:20

Zıp Code

(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)
he Articles of Organization for this Limited I lorida document number L21000002449		2/22/2020 and assigned
his amendment is submitted to amend the fol	losving:	
. If amending name, enter the new name	of the limited liability company	<u>here</u> :
ne new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "L.L.C." or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
nter new mailing address, if applicable:		
<u>lailing address MAY BE A POST OFFICE</u>	<u></u>	
. If amending the registered agent and/or gent and/or the new registered office addr	• •	records, enter the name of the new registe
Name of New Registered Agent:	One Rose Consulting, LLC	
New Registered Office Address:	12207 Colony Lakes Blvd.	
	Enter F	lorida streci address
	New Port Richey	, Florida <u></u>

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.

Cin

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>	Address	Type of Action
MGR	Randolph Yerkes	12207 Colony Lakes Blvd.	⊡∧dd
		New Port Richey, FL 34654	□Remove
			■ Change
MGR	Melinda Yerkes	1600 SILVER CREEK ROAD, UNIT 418	□Λ đ d
		BULLHEAD CITY, AZ 86442	🗀 Remove
			□Add
			□Remove
			□Change
		,,,	🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			🗆 Add
			Remove
		_	□Change

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Chan	ging the last name of the Registered Agent to Yerkes instead of Yerks
Chan	ging the last name of Randolph to Yerkes instead of Yerks
Chan	ging the Registered Agents Company Name To One Rose Consulting, LLC
Mantina d	ate, if other than the date of filing: (optional)
lote: If the	ate, if other than the date of filing:
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of h day after the record is filed.
ated	January, 7th 2021
	1/4/
	/ /
-	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00