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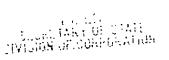
WHY SO NOT SO NOTIFIED

COVER LETTER

TO: Registration So Division of Cor			
Blue Sky K	layaks LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jordan L Dohner		
	<u> </u>	Name of Person	
	Blue Sky Kayaks	Name of Limited Liability Company ment and fee(s) are submitted for filing. concerning this matter to the following: lan L Dohner Name of Person e Sky Kayaks Firm/Company 4 N Maple Ave Address stal River, Florida, 34428 City/State and Zip Code skykayaks@gmail.com E-mail address: (to be used for future annual report notification) ng this matter, please call: at (352	
		Firm/Company	
	8594 N Maple Ave	Name of Person Firm/Company Address a. 34428 City/State and Zip Code 1.com ress: (to be used for future annual report notification) rase call: at (
		Address	
	Crystal River, Florida, 344	928	
	- · · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	blucskykayaks@gmail.com		
			(notification)
For further information of	concerning this matter, please c	all:	
Nancy N Suto			8
Name o	of Person		sytime Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status &
Mailing Addres		· · · · · · · · · · · · · · · · · · ·	
Registration Division of C			Section Corporations
P.O. Box 632	-	The Centre	of Tallahassee
Tallahassee,	FL 32314	2415 N. Mo	onroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 APR 12 PH 4: 22

Blue Sky Kayaks LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

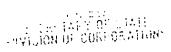
The Articles of Organization for this Limited Liability Company	were filed on March 25, 2021 and as	signed
Florida document number L21000140219		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)		
(Maining address MAT BE A FOST OFFICE BOA)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the ne</u>	w registered
Name of New Registered Agent:	···	
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City Zip Code	
Now Degistered Agent's Signature if changing Pegistered Agent:		

New Registered Agent's Signature, it 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 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	21 APR 12 PM 4: 22	Type of Action
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Jour L Da- Signature of a member or authorized representative of a member	April 8												