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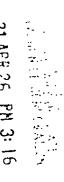
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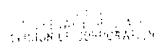
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TO: Registration S Division of Co		\$	9
Blue Fin F	dD., LLC	A P P	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Linda T. DeLangis		
		Name of Person	
	Blue Fin HD., LLC		
		Firm Company	
	1339 Loretto Circle		
		Address	
	Odessa, Florida 33556		
		City/State and Zip Code	
	bluefinhd@yahoo.com	to be used for future annual report no	
For further information	concerning this matter, please c	•	(fileation)
Linda T. DeLangis		909 800-2808 at ()_	
Name	of Person	Area Code Dayti	me Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fcc	□ \$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 Addre Registration		Street Address: Registration S	ection
-	Corporations	Division of Co	
P.O. Box 63 Tallahassee,		The Centre of	
rananassee,	i L J∠J1+	Z410 N. :VIONE	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 APR 25 PH 3: 16

Blue Fin HD., 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 L	iability Company	were filed on 26 March 2021	and assigned
Florida document number 800362904868	·		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "L	.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applie	cable:	Remains the Same: 1339 Lo	oretto Circle
(Principal office address MUST BE A STREE	ET ADDRESS)	Odessa, Florida 35566	
Enter new mailing address, if applicable:		Remains the Same: 1339 Le	oretto Circle
(Mailing address MAY BE A POST OFFICE BOX)		Odessa, Florida 33556	
B. If amending the registered agent and/or agent and/or the new registered office addresses and the new registered office			ter the name of the new registered
Name of New Registered Agent:	Mich C. Debat	ng io	
New Registered Office Address:	1339 Loretto Circle		
	Enter Florida street address		
	Odessa		Florida 33556 Zip Code
			Zip Code
New Registered Agent's Signature, if changing			
I hereby accept the appointment as registery provisions of all statutes relative to the propaccept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete istered agent as registered office	performance of my duties, provided for in Chapter 60	, and I am familiar with and 15, F.S. Or, if this document is

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

		(X, Y)
in. Adletyr	G SUAR	4.43-36

<u>Title</u>	<u>Name</u>	Address 21 AFR 26 PF	3: 16 Type of Action
AMBR	Rhett DeLangis	1339 Loretto Circle, Odessa FL 33556	■Add
			□Remove
			⊡Change
			Remove
			□ Change
			Remove
		· · · · · · · · · · · · · · · · · · ·	□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove

	21 AFR 25 PH 3: 16
Rhett E. DeLangis - Should have been listed as a Authoriz	zed Member in the first place.
Linda T. DeLangis - To remain the same.	
ective date, if other than the date of filing:	
te: If the date inserted in this block does not meet the applied ument's effective date on the Department of State's records.	to date of filing or more than 90 days after filing.) Pursuant to 605.02 able statutory filing requirements, this date will not be listed a
cord specifies a delayed effective date, but not an effective tils s filed.	me, at 12:01 a.m. on the earlier of: (b) The 90th day after th
ed 20 April 2021	
OL N. W.	_· 7
Signature of a member or autho	rized representative of a member

 $\mathbb{E}(\delta) \in \mathcal{F}_{k,k}(s,s,s_k)$

Filing Fee: \$25.00

Typed or printed name of signee