

K21000184933

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(Address)

(Address)

(City/State/Zip/Phone #)

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2021 NOV -2 PM 4:55  
CLERK OF SUPERIOR COURT  
STATE OF OHIO

A. BUTLER

NOV 15 2021

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Blackstone Creations, L.L.C.  
\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthew Sams  
\_\_\_\_\_  
Name of Person  
  
Blackstone Creations, L.L.C.  
\_\_\_\_\_  
Firm/Company  
  
315 Hunters Lake Way Suite 2107  
\_\_\_\_\_  
Address  
  
Ponte Vedra, FL 32081  
\_\_\_\_\_  
City/State and Zip Code  
  
matthew.b.sams@gmail.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Sams                      615              424-1527  
\_\_\_\_\_  
Name of Person                      at (              )              Daytime Telephone Number  
Area Code

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|---|--|--|

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

2021 NOV -2 PH 4: 56

Blackstone Creations, LLC.

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

FILED  
NOV 11 2021  
CLERK OF CIRCUIT COURT  
IN AND FOR THE STATE OF FLORIDA  
JANUARY 11 2021

The Articles of Organization for this Limited Liability Company were filed on 4/21/2021 and assigned  
Florida document number L21000184933.

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 "LLC."

**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*

\_\_\_\_\_, Florida \_\_\_\_\_  
City 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Raymond A. Verbeck	8491 Satterlee Rd	<input type="checkbox"/> Add
		Greenville, MI 48838	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Matthew B. Sams	315 Hunters Lake Way Suite 2107	<input checked="" type="checkbox"/> Add
		Ponte Vedra, FL 32081	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(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)

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 October 15<sup>th</sup>, 2021

Signature of a member or author

Signature of a member or authorized representative of a member

ANIBR

RAYMOND A. VERSELIL

Typed or printed name of signee

**Filing Fee: \$25.00**