L21000191807

(Requestor's Name)
(10422237 6 1161116)
(Address)
· ·
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800424435748

SECRETARY OF SEATOR

COVER LETTER

TO: Registration Sec Division of Corp		•	a
SUBJECT:	BLUE	NATER MHP LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	K	Name of Person	
			2024 AF SECR
	93-	Finn/Company PRESCUTT ST	7024 APR -8 AM III: 52 SEGRETARY OF STATE SEGRETARY OF STATE
		Address	
	FORT MYE	City/State and Zip Code	31 7 8
	E-mail address: (to be used for future annual report notification)	
For further information co	ncerning this matter, please c	all:	
Kaly Name of	HAVET Person	at (815) 262-944 Area Code Daytime Telepho	one Number
Enclosed is a check for the	e 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 Address Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	Street Address: Registration Section Division of Corporatio The Centre of Tallahas 2415 N. Monroe Stree Tallahassee, FL 32303	ssee t, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLUE WATER IN			
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears d Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Compar Florida document number <u>L 21000191807</u>	ny were filed on	4/212021	and assigned
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited list	ability company he	<u>re</u> :	
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the de	signation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			2021 SED
Principal office address MUST BE A STREET ADDRESS)		ر ۱ ۱	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			75 J
3. If amending the registered agent and/or registered office and/or the new registered office address here: Name of New Registered Agent:	e address on our re	cords, <u>enter the na</u>	ne of the new regist
New Registered Office Address:	Enter Flori	da 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 Aûthorized Person(s) authorized to manage, enter the title, name, and address of each person being added of removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	JAY HUBER	937 PRESCOTT ST FORT MYEVES BEDCH, FL	≾ Add
		FORT MYEVES BEACH, FL	- 33931
			□Remove
			□Change
<u>AMBR</u>	REBECCA HUBER	fort Myers Bench, F	S Add
		fort myers bench, fl	EAST DRemove
			Remove 8 AMChalage
			Change → Change
			22 Add
			□Remove
			□ Change
			□ Add
			□Remove
			□ Change
			□ Add
			□Remove
			Change
			□ Add
			□Remove
			□Change

		<u> </u>			-	
						
			<u></u>			
			 .			
				HE HE S	2021	
				RET L	APR	
				五 元 元 元 元	8-	(mate)
				ere En Ti]	- 1 1 1 1
				<u> </u>	= 5	mar.
			 -	<u> </u>	70	
		<u></u>				
tive date, if other than the date of filing: ffective date is listed, the date must be specific and can	inot be prior to d	late of filing or me	ne than 90 days	optional)) Pursua	int to 605 ()
If the date inserted in this block does not meet ment's effective date on the Department of State	the applicable	e statutory filing	g requirements	s, this date	will no	t be listed
mont 3 offcott of date of die Bepartment of Batte	. y records.					
ord specifies a delayed effective date, but not an	effective time.	. at 12:01 a.m. c	on the earlier o	of: (b) Th	c 90th (day after t
ñled.						
1 4/2/24						
Signature of a men	n					

Filing Fee: \$25.00