

h71 000508015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

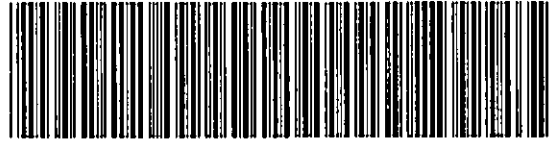
(Document Number)

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2022 JUL 29 AM 8:00  
RECEIVED  
FALL ASSESSMENT DEPT.

FILED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: BLUE WATER REAL ESTATE MANAGEMENT LLC

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:

Austin Pennington

Name of Person

BLUE WATER REAL ESTATE MANAGEMENT LLC

Firm/Company

2002 E 5TH AVE 108

Address

TAMPA, FL 33605

City/State and Zip Code

ap@aprcalstatecompany.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Austin Pennington

813

629-0997

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

2022 JUL 29 AM 8:00  
REGISTRATION SECTION  
TALLAHASSEE, FL  
FILED

BLUE WATER REAL ESTATE MANAGEMENT LLC

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>
MGR	CARLETTA CLYATT	2002 E 5TH AVE UNIT 108 TAMPA FL 33605	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
JUL 18 2008  
AM 8:00

2022 JUL 29 AM 8:00  
SECRETARY'S OFFICE  
ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 07-29-2022 BY 60322  
UCBAW

FILED  
2022 JUL 29 AM 8:00  
SECRETARY OF STATE  
HARTFORD, CT

(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) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 7/26/2022

Signature of a member

Signature of a member or authorized representative of a member

AUSTIN PENNINGTON

Typed or printed name of signee