

h22000040103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

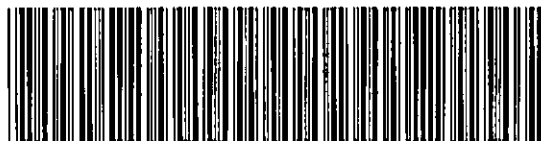
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2022 JUN 27 PM 2:32
SECRETARY OF
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Blue Line Insulation of ECB, 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:

Lauren H. Woolsey

Name of Person

Blue Line Insulation of ECB, LLC

Firm/Company

1569 Chandlee Avenue

Address

Panama City, Florida 32405

City/State and Zip Code

laurenwoolsey2012@gmail.com

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

For further information concerning this matter, please call:

Lauren H Woolsey

850

532-5070

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

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

Blue Line Insulation of ECB, LLC

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

FILED
2022 JUN 27 PM 2:31

SECRETARY OF
TREASURER

The Articles of Organization for this Limited Liability Company were filed on 01/20/2022 and assigned
Florida document number L22000040103.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1569 Chandlee Avenue - Ste. A

Panama City, Florida 32405

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1569 Chandlee Avenue - Ste. A

Panama City, Florida 32405

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:

TJ Mathew Woolsey

New Registered Office Address:

330 Blackshear Drive

Enter Florida street address

Panama City

Florida 32404

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	TJ Mathew Woolsey	330 Blackshear Drive	<input checked="" type="checkbox"/> Add
		Panama City, Florida 32404	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Lauren M Hebert-Woolsey	330 Blackshear Drive	<input type="checkbox"/> Add
		Panama City, Florida 32404	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<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.

Lauren M. Hebert-Woolsey
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Typed or printed name of signee