

L22000105748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

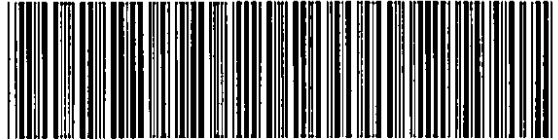
(Document Number)

Certified Copies _____ Certificates of Status _____

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03/21/22--01036--001 **25.00

FILED
2022 APR 20 PM 4:21
CLERK OF COURT
JULIA A. BROWN

Name Change

MAY 10 2022

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BLGK Holdings 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:

John Bellard
Name of Person
BLGK Holdings LLC
Firm/Company
5209 VIA MAIOR STE#7
Address
Orlando FL 32808
City/State and Zip Code
BravoBellard46@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Bellard at (321) 890-2643
Name of Person Area Code Daytime Telephone Number

2002 APR 20 PM 4:21

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 APR 20 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FL

April 5, 2022

JOHN BELLARD
5209 VIA MAIOR STE 7
ORLANDO, FL 32808

SUBJECT: BLGK LLC HOLDING
Ref. Number: L22000105748

We have received your document for BLGK LLC HOLDING and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Cover page and page 2 of this document is missing

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

TERARRA A SIMMONS
OPS

Letter Number: 722A00007839

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

B.L.S.K. ~~HOLDINGS 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 Liability Company were filed on 3/1/2022 and assigned
Florida document number L22000105748

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

B.L.S.K. HOLDINGS LLC.

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)

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

•

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Just changing the format of the
LLC on my business name, Had the LLC
Backwards "BLEK Holdings LLC."
New Name

E. Effective date, if other than the date of filing: _____ (optional)

(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.

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

4/14/22

Signature of a member or authorized representative of a member

John Bettard

Typed or printed name of signee

Filing Fee: \$25.00