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COVER LETTER

Division of Co	orporations							
	ter Properties, LLC							
SUBJECT:	Name of Limited Liability Company							
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.						
Please return all corresp	ondence concerning this matter	to the following:						
	Klaralee R. Charlton, Esq.							
		Name of Person						
	Katz, Look & Onorato, P.	С.						
		Firm/Company						
	1120 Lincoln St., #1100	1120 Lincoln St., #1100						
	Denver, CO 80203							
	kcharlton@thedenverlawyers.com E-mail address: (to be used for future annual report notification)							
F-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:						Cirilere :		
Klaralee R. Charlton		303 832-1900 at ()		· **;	2022 APR 22	- ،		
Name	of Person	Area Code Daytime Te	lephone Number	,	<u> </u>	. :		
Enclosed is a check for	the following amount:				2: 25	احري ۱		
■ \$25.00 Filing Fee								
<u>Mailing Addr</u> Registration		Street Address: Registration Section	n					

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FI. 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

Bluie Water Properties, 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 March 15, 2022 Florida document number 1.22000129611 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BlueWater B&B Properties LLC 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 ___

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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			□Remove
			□Change
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Typed or printed name of signee

Filing Fee: \$25.00