

L220000499465

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

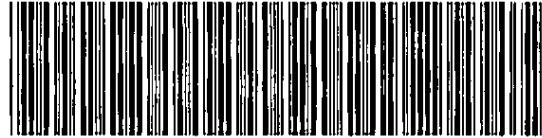
(Business Entity Name)

(Document Number)

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2023 JAN -3 PM 3:53  
STATE OF UTAH  
TALLAHASSEE, FL 32310

AS

## COVER LETTER

TO: Registration Section  
Division of Corporations

Contract Junction

SUBJECT: \_\_\_\_\_  
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:

Sheldon Andre

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

37100 Old Conners Highway

\_\_\_\_\_  
Address

Canal point FL 33438

\_\_\_\_\_  
City/State and Zip Code

sheldon@Bluewaterholdinggroup.net

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

2023 JAN -3 PM 3:53  
TALLAHASSEE, FL 32303

For further information concerning this matter, please call:

Sheldon Andre

561 951 5352  
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**

Contract Junction 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 11/28/2022 and assigned  
Florida document number L22000499465

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)**

37100 Old Conners Highway

Canal Point FL 33438

**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:

37100 Old Conners Highway

*Enter Florida street address*

Canal Point

*City*

, Florida 33438

*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

Title	Name	Address	Type of Action
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2022 JAN 14 PM 3:53  
SOUTH AUSTIN, TEXAS  
FLORENCE

2020 JAN -3 PM 3:53  
STATION  
TALLAHASSEE, FL 0610A

2020-11-3 PM 3:53

(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 Dec / 27<sup>th</sup> / 2022, \_\_\_\_\_

Sheldon Ande

Signature of a member or authorized representative of a member

SHELDON ANDRE

Typed or printed name of signee