# L23000104215

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### **COVER LETTER**

TO:

то:	Registration Sec Division of Corp			
SUR II	ECT: BAMHOO-U	JSA LLC		
., () 1531		Name of Limi	ted Liability Company	
The en	closed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please	return all correspon	dence concerning this matter	to the following:	
		ROMEO VELAQUEZ		
			Name of Person	
		Bemboo-U	Δ≥	
			Firm/Company	
		100 N BEL AIR DRIVE		
			Address	
		PLANTATION, FL 33317		
			City/State and Zip Code	
		BAMHOOUSA@GMAIL.G	COM to be used for future annual report notification)	
For fu	rther information co	ncerning this matter, please ca	•	
ROM	EO VELAZQUEZ		at (954 ) 2759205	
	Name of	Person	Area Code Daytime Telepho	ne Number
Enclos	sed is a check for the	e following amount:		
≅ Sz	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 S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7	Street Address: Registration Section Division of Corporatio The Centre of Tallahas 2415 N. Monroe Stree Tallahassee, FL 32303	ssee 1, Suite 810

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BAMHOO-USA LLC			
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears or ted Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Comp.	any were filed on 02/27/	2023	and assigned
	<del></del>		
Florida document number L23000104215			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited l	liability company here:		
BLUE TIDE INNOVATIONS LLC			
The new name must be distinguishable and contain the words "Limited L	iability Company," the desig	nation "LLC" or the abbre	riation "L.L.C."
Enter new principal offices address, if applicable:			
• •	<del></del>		
Principal office address MUST BE A STREET ADDRESS			
		<del></del>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			<u>~2</u>
	<del></del> "	`- ;-	
			(-)
B. If amending the registered agent and/or registered off	ice address on our reco	rds, enter the name o	f the new regis
agent and/or the new registered office address here:	ice addition on our reco	day enter the manage o	
		•	<u> </u>
		. •	Ċż
Name of New Registered Agent:		·	-
New Registered Office Address:			
THE WAY TO GIGGE TO GO THOU THOU THE GO	Enter Florida	street address	
		. Florida	
<del></del>	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>	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Change
<u> </u>			DAdd
			□Remove
			□Change
	·		□Add
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			□Change
<u>.</u>			□Λdd
			□Remove

Page 2 of 3

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<u>e:</u> 1	e date, if other than the date of filing:
reco he 9	and specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of the day after the record is filed.
ed <u>C</u>	OCTOBER 16TH , 2023
	0//
	Signature of a member or authorized representative of a member
	ROMEO VELAZQUEZ