Florida Department of State Pivision of Corporations Electronic Filting Cover Sheet The Property of Corporations Electronic Filting Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000158789 3)))



H240001587893ABCB

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC REGISTERED AGENT CHANGE BLUE BACK ENTERPRISE LLC



Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 0 1 2024

K. Brumbley

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l. N	ame of the limited liability company: Blue Back Enter	orise LL	C	
2. (a)	1043 VERNON STREET		(b) 1043 VERNON STREET	
• •	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	FELLSMERE, FL 32948		FELLSM	MERE, FL 32948
	05/01/2024		L2300016	52672
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	LEGALINC CORPORATE SERVICES INC.			
	Registered Agent and Registered Office shown on the records of 476 RIVERSIDE AVE.	the Flor	ida Dept. of S	late:
	Registered Office Address (MUST BE FLORIDA STREET	<u>ADDRE</u>	<u>22</u> 1	
	JACKSONVILLE, F	32202		20
/L\	Corporate Creations Network Inc.			24 HI
(b) .	Enter name of NEW Registered Agent and/or NEW Registered	Office	address:	2024 HAY - 1
	801 US Highway 1			
	NEW Registered Office Address:			6: 06
	North Palm Beach Fl	33408		
hange gent vas/w	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	registe ability of the l	red office a company, it mited liabil	ind the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in
_(strella Tavarez	E	strella Tavare	z, Attorney-in-Fact
	iture of a member or authorized representative of a member			Printed or typed name of signee

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.

Signature of Registered Ageny