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06/18/21

COVER LETTER

TO:

Registration Section

Division of Co	rporations		
BLUE LA	KE LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	LUIS M ERAZO		
		Name of Person	
	BLUE LAKE LLC		
		Firm/Company	
	3624 LA SALLE AVE		
		Address	
	SAINT CLOUD, FL 3477	2	Paul (7) }
		City/State and Zip Code	17. (7.
	CONTAXBSLLC@GMAI		fication) ————————————————————————————————————
	E-mail address: (to be used for future annual report noti	neation)
For further information of	concerning this matter, please c	all:	AM 8:1
LUIS M ERAZO		407 7313331 at ()	FATE :
Name (of Person		e Telephone Number
Enclosed is a check for t	he 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 Fiting Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address: Registration Sec	ction
Division of C		Division of Cor	
P.O. Box 632		The Centre of T	allahassee
Tallahassee,	FL 32314	2415 N. Monroe	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLUE LAKE LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	nv as it now appears on our record Liability Company)	<u>s.</u>)	
The Articles of Organization for this Limited Liability Company	were filed on 04/07/2024	an	d assigned
lorida document number L24000165818	-		C
his amendment is submitted to amend the following:			
a. If amending name, enter the new name of the limited liab	ility company here:		
BLUE LAKE HOUSE LLC			
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC"	" or the abbreviation	n "L.L.C."
Inter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)	3624 LA SALLE AVE		
	SAINT CLOUD, FL 34772		
		7.	
inter new mailing address, if applicable:		= = = = = = = = = = = = = = = = = = = =	
Mailing address MAY BE A POST OFFICE BOX)	3624 LA SALLE AVE	SE AL	gasers
The state of the s	SAINT CLOUD FL 34772	E ST &	
If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the	new regis
Name of New Registered Agent:			
New Registered Office Address:		***	
	Enter Florida street address	\$	
		orida	. ,
	City	Zip (ode

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 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>	Address	Type of Action
			□ Remove
			Change
			□Add
			□Remove
			□Change
		· · · · · · · · · · · · · · · · · · ·	E Add
		AHASSEE. FL	Remove
		1	ı
			□ Add
			Remove
			DChange
			
			□Remove
			_
			□Add
			□ Remove

		OUSE LLC, since I consulted with
the IRS by not allowing me to a	pply for the EIN online with BLUE LAKE LL	.C and they explained to me that it is
because there is an LLC with th	e same name, and I checked and it is inactive.	for this reason I am requesting a
name change.		
I also corrected the address of t	he main address and mailing of the company	
		(1) (1) (1) (2)
		<u> </u>
		<u> </u>
		SSC A F
		8: - 8: -
		<u> </u>
tive date, if other than the da	te of filing:	(optional)
flective date is listed, the date must be If the date inserted in this block	specific and cannot be prior to date of filing or more does not meet the applicable statutory filing re	than 90 days after filing.) Pursuant to 60:
nent's effective date on the Depa	rtment of State's records.	
rd specifies a delayed effective de	ate, but not an effective time, at 12:01 a.m. on	the earlier of: (b) The 90th day afte
īled.		
June 11	2024	
	da	