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### **COVER LETTER**

Registration Section **Division of Corporations** 

SUBJECT:	MD Blurwa	2	
	Name of Limi	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspor	dence concerning this matter t	to the following:	
		2	
		Maria Giles Name of Person	
		Name of Person	
	m D	Bluewater Inv	shorts LLC
		Firm/Company	***
	683	9 NW 63 19 Way	/
		Address	<del></del>
	Park	land FL 3306	7
City/State and Zip Code			
	915 bluewater	o be used for future annual report not	
	E-mail address: (t	o be used for future annual report not	ification)
For further information co	ncerning this matter, please ca	ll:	
	G.105	at (954) 410 Area Code Daytim	- 525
Name of	Person	Area Code Daytim	ne Telephone Number
Enclosed is a check for the	e 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

mp Bhouxiter		L-L-C		
( <u>Name of the Limited Liability</u> (A Florida l	Company as it now appear Limited Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Co Florida document number <u>トスペロックス</u> ↓ ロッフィ	ompany were filed on	5-23-202y	and as	signed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability company he	<u>re</u> :		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the do	esignation "LLC" or the abb	reviation "I	L.C."
Enter new principal offices address, if applicable:		<u>.                                    </u>	<u>. [</u>	
(Principal office address MUST BE A STREET ADDRE	ESS)	75	24. 25.	Last
3 14		i i	01/	1 (
		正: :::::::::::::::::::::::::::::::::::	201	1
Enter new mailing address, if applicable:		رن. ده د س	* PH	
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(Mailing address MAY BE A POST OFFICE BOX)			±; ;;	
	<del></del>		٠, ٥.	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our re	cords, <u>enter the name</u>	of the ne	w registered
Name of New Registered Agent:	<del></del>			
New Registered Office Address:				
	Enter Flori	da street address		<del>-</del>
		, Florida		
	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>	Address	Type of Action
MGR	Maria Giles	6834 Now 631 Way	□Add
		Parkland FL 33067	□Remove
		<del></del>	□Change
	<del></del>		□Add
		<del></del>	□ Remove
		<del></del>	□Change
			□Add
		<del></del>	□Remove
			Change
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			🗆 Add
			□Remove
			□Change

<u></u>	
	date, if other than the date of filing: 11.15.24 (ontional)
	date, if other than the date of filing: 11.15.27 (optional) ive 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
<u>ote:</u> If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
cumen	s effective date on the Department of State's records.
aaasd a	nesifican e delavord effectivo due have been establicativo de la 1200 de la 1200 de la 1200 de la 1200 de la 1
is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	11.15-24
	mania 2th
	Signature of a member or authorized representative of a member
	organization of antiferror of authorities representative of a memory
	maria Giles

Filing Fee: \$25.00