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SECRETARY OF STATE

COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations				
CUDIFCT.		Blu Grove Design, LLC				
SUBJECT:Name of Limited Liability Company						
The enclosed	f Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Heather Manry				
			Name of Person			
			Firm/Company			
		420 Shore Dr				
		Miramar Beach, FL 32550	Address			
		heathermanry@gmail.com	City/State and Zip Code			
For further in	nformation c	E-mail address: (oncerning this matter, please e	to be used for future annual report	notification)		
Heather Mar	nry		404 475-878' at ()			
	Name o	f Person	Area Code Day	time Telephone Number		
Enclosed is a	a check for th	ne following amount:				
■ \$25.00 B	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		Street Address: Registration Section				
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Mo	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blu Grove Design, LLC		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company	were filed on September 18th, 2024	and assigned
lorida document number L24000408054		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liabi	lity company here:	
he new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the ab	oreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		2021 NOV
		1 8 TI
	至	
Inter new mailing address, if applicable:	ر ان کار ان کار	2 <u> </u>
Mailing address MAY BE A POST OFFICE BOX)	m. m-	, , U
3. If amending the registered agent and/or registered office a	ddress on our records, enter the nam	e of the new regis
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, 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 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
MGR	Christopher G Robinson	408 Wicklow St	□Add
		Tyrone, GA 30290	■Remove
			□Change
MGR	Lisa M Robinson	408 Wicklow St	□Add
		Tyrone, GA 30290	≅ Remove
			□Change
AMBR	Heather Marry	420 Shore Da Miranar Beach, FL 32550	□ Add
		Miranor Beach, FL 32550	□ Remove
			■ Change
			□Add
			□Remove
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			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing:

(If an effective date is listed than the date of filing: (optional) (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. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated October 9th Signature of a member or authorized representative of a member Heather K Manry Typed or printed name of signee

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