

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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALEXANDER ALMONTE, ESQ/I INCORPORATE LTD

Account Number : I20070000019 Phone : (518)689-1212 Fax Number : (518)432-0742

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

Email	Address:						
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **BLUEJEM MANAGEMENT LLC**

Certificate of Status Certified Copy	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

New Registered Office Address:		ress Florida Zin Code		
New Registered Office Address:	Enter Florida street addr	ress		
N. D. C. 1007 411	red Office Address: Enter Florida street address			
Name of New Registered Agent:				
		1,7		
tent and/or the new registered office address h	<u>iere</u> :	Φ.		
. If amending the registered agent and/or regi	stered office address on our records, ente			
		<u> </u>		
Mailing address MAY BE A POST OFFICE BO	<u></u>			
nter new mailing address, if applicable:		- <u>e</u>		
		207		
Principal office address MUST BE A STREET	ADDRESS)			
nter new principal offices address, if applicab	le:			
ne new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "Ll	LC" or the abbreviation "L.L.C."		
BLUEGEM MANAGEMENT LLC				
. If amending name, enter the new name of the	e limited liability company here:			
his amendment is submitted to amend the follow	ing:			
lorida document number L24000512553	 ,			
he Articles of Organization for this Limited Liab	ility Company were filed on DECEMBER 1	and assigned		
	Liability Company as it now appears on our reco Florida Limited Liability Company)			
(A				

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.

2-Jan-2025 19:18 Fax 15184320742

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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>	Name	Address	Type of Action
			□ Add
			□Remove
			☐ Change
*			
			□Remove
			□Change
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Effective date, if other than the defective date is listed, the date must be Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the	applicable statut	ory filing requirem	ents, this date will not	t to 605.0207 be listed as t
e record specifies a delayed effective of is filed.	date, but not an effec	tive time, at 12:	01 a.m. on the earl	ier of: (b) The 90th de	ay after the
JANUARY 2ND	2025	·			
Dated					

Filing Fee: \$25.00