P14000011371

(Re	questor's Name)			
(Ad	dress)	·		
(Ad	dress)			
(Cit	y/State/Zip/Phone	+)		
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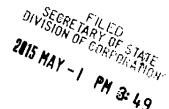
TO: Amendment Section

Division of Corporations

Bluu Designs, Corp NAME OF CORPORATION: DOCUMENT NUMBER: <u>14000011371</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



BLUO Designs Corp.	43
(Name of Corporation as currently filed with the	ne Florida Dept. of State)
P14000011371	
(Document Number of Corporation	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation	<u>:</u>
BLU PROJECTS CORP. name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," word "chartered," "professional association," or the abbreviation.	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	_N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add	
Name of New Registered Agent N/A	
·	
(Florid	a street address)
New Registered Office Address: N/A	Florida
/	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famil	iar with and accept the obligations of the position.
Signature of Nav. Pagista	and least if abanaina

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

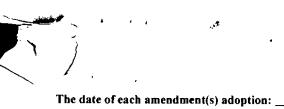
Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe			
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change		-		N/A	
Add					
Remove				/	
2) Change				, 	
Add					
Remove					· <u>·</u> ·
3) Change		- —	/ 		
Add					
Remove					
4) Change		_ /			
Add					
Remove	,	<i>.</i> *		***************************************	<u>.</u>
5) Change					
∧dd					
Remove					· · · · · · · · · · · · · · · · · · ·
6) Change					
Add					
Remove					

. If amending or adding a (Attach additional sheets,	idditional Articles	s, enter change(s)	here:		
	ij necessary). (L	se specific)			
N/A					
				<u> </u>	
			/		
<u> </u>			/_		
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<u> </u>					
	/				
	/				
				_	
If an amendment provi	des for an exchan	ve reclassificatio	n, or cancellati	ion of issued sha	Ires.
provisions for impleme	enting the amendr	nent if not conta	ned in the ame	ndment itself:	
(if not applicable, i	ndicate N/A)				
NA					
, , , , , , , , , , , , , , , , , , , 		•			
		/			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 04/27/15	
Signature Alabaudo	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
appointed nationally by that nationally,	
Maryan F. Caldegon (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	