Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H14000200561 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

: SALVATORI, WOOD, BUCKEL, CARMICHAEL & LOTTES Account Name

Account Number : 120030000112 : (239)552-4100 Phone Fax Number : (239)649-0158

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN BLUE HOUSE FLORIDA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$35.00

C. CARROTHERS

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

Division of Corpora			
NAME OF CORPORA	TION: Blue House	e Florida, Inc.	
DOCUMENT NUMBE	R: P1400004664	1	
	Amendment and fee are su		
Please return all correspo	endence concerning this ma	tter to the following:	
C	. Lane Wood, E	•	
		Name of Contact Perso	n
S	Salvatori Wood E	Buckel Carmicha	el & Lottes
-		Firm/ Company	
9	132 Stada Place	e, Fourth Floor	
•		Address	
N	laples, FL 34108	3	
_		City/ State and Zip Cod	c
ilh@:	swbcl.com		
<u> </u>		sed for future annual report	notification)
	·	•	
For further information c	oncerning this matter, pleas	sc call:	
C. Lane Wood		at (239	552-4100 de & Daytime Telephone Number
Name of	Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a check for the	ne following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43,75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	g Address		Address
	ment Section in of Corporations		Iment Section on of Corporations
	ox 6327	Clifton	Building
Tallaha	ssee, FL 32314		executive Center Circle
		r dridni	4220, 11, 22301

Articles of Amendment Articles of Incorporation

14 AUG 26 AM 10: 49

enomen + 27 15 C 175

		MULAHASSEE, FLO)HDA
currently filed with the F	lorida Dept. of State)		
nt Number of Corporation (i	f known)		
1006, Florida Statutes, this	Florida Profit Corporat	ion adopts the following en	nendment
me of the corporation:			
			e <i>ne</i> w
ation "Corp," "Inc," or " tion," or the abbreviation " if applicable:	Co". A professional co	corporated" or the abbre	viation ain the
	N/A		
d/or registered office address N/A	ress in Florida, enter th i	e name of the	
(Florida str	ees address)		
NI/A		orida	
N/A	in the second		
	nt Number of Corporation (in Number of Corporation (in 1006, Florida Statutes, this same of the corporation: Itain the word "corporation did not the word "corporation did not "Corp," "Inc," or "indion," or the abbreviation "different ADDRESS") Icable: OFFICE BOX)	ame of the corporation: Itain the word "corporation," "company," or "in nation "Corp," "Inc," or "Co". A professional contion," or the abbreviation "P.A." If applicable: TREET ADDRESS) Icable: OFFICE BOX) Indior registered office address in Florida, enter the wateristered office address:	nt Number of Corporation (if known) 1006, Florida Statutes, this Florida Profit Corporation adopts the following en ame of the corporation: The stain the word "corporation," "company," or "incorporated" or the abbreviation "Corp," "Inc," or "Co". A professional corporation name must contation," or the abbreviation "P.A." If applicable: TREET ADDRESS) Icable: N/A Icable: N/A Indior registered office address in Florida, enter the name of the wregistered office address: N/A

Page 1 of 4

Signature of New Registered Agent, if changing

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)

Example:

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

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

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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	S	Cecile Lorrain	83 rue de Lectaine
Add			Lenoncourt 54110
Remove			France
2) Change	S	Chantale Claudine Lorrain	83 rue de Lectaine
Add			Lenoncourt 54110
Remove			France
3) Change	T	Chantale Claudine Lorrain	83 rue de Lectaine
Add			Lenoncourt 54110
Remove			France
4) Change	Р	Jean-Micheal Lorain	83 rue de Lectaine
Add			Lenoncourt 54110
Remove			France
5) Change	P	Jean-Michel Lorrain	B3 rue de Lectaine
Add		•	Lenoncourt 54110
Remove			France
6) Change			
Add			
Remove			

Page 2 of 4

E. If amending or adding additional sheets, if n	tional Articles, enter ecessary). (Be spec	change(s) here: fic)		
N/A				
		· · · · · · · · · · · · · · · · · · ·		
				
			•	
······································				
•				
				
<u> </u>				
F. If an amendment provides to provisions for implementing (if not applicable, indicable). N/A	ig the amendment if	essification <u>, or can</u> not contained in th	cellation of issued sha e amendment itself:	<u>1769.</u>
				
·				
				

date this document was signed.		
Effective date If applicable:		
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECICONE)	
The parendment(s) was/were ado by the stareholders was/were sur	pied by the shareholders. The number of votes cast for the amendment(s) Nicient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was vere sufficient for approval	
by	(voiling group)	
-,	(valing group)	
The amendment(s) was/were adoparties adoparties adoparties and required.	prod by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoption was not required.	pled by the incorporators swithout shareholder netion and shareholder	
Dated August 2	11, 2014	
Signature	TOW,	
sslected	recior, president or other officer – if diferences or afficers have not been , by an incorporator – if in the hands of a receiver, inistee, or other court ad fiduciary by that fiduciary)	
•	Jean-Michel Lorrein	
•	(Typed or printed name of person signing)	_
1	President	
~	(Title of person signing)	_