## 618000123116

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300316642273

Q6/13/16--01003--002 \*+25.00

N COOPER AUG 1 6 2018

## **COVER LETTER**

TO: Registration Se Division of Cor			
BLUE 100 SUBJECT:			
Sebuter.	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	DIEGO DURAND		
		Name of Person	
	IGMASA MANAGEMEN	т	
		Firm/Company	<del>-</del>
	175 SW 7TH STREET,	SUITE 2006	
		Address	<del></del>
	MIAMI FLORIDA, 33130	)	
	-	City/State and Zip Code	" <del></del>
	D.DURAND@IGMASA.C		<u></u>
		to be used for future annual report noti	lication)
For further information co	oncerning this matter, please co	all:	
DIEGO DURAND		305 447-2611	
Name of	Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for th	e following amount:		
S25.00 Fiting 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BLUE 100 LLC		
(Name of the Limited Liab (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)	÷ <u>=</u>
The Articles of Organization for this Limited Liability	Company were filed on 5/16/2018	and assigned
Florida document number L18000123116		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<b>18</b> I⊻sE
Principal office address MUST BE A STREET ADD	DRESS)	AUG
		<del></del>
		7. 79 A
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		£
3. If amending the registered agent and/or registered agent and/or the new registered office ad-	istered office address on our records, <u>ent</u> <u>dress here</u> :	er the name of the
Name of New Registered Agent:		
New Registered Office Address:	E El	
	Enter Florida street address	
	, Florida	Zip Code
	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>	<u>Address</u>	Type of Action
AMBR	BLOCK 54 S.A.	Plaza Credicorp Bank, piso 26	<b>=</b> Add
		Ave. nicanor de obarrio Calle 50	☐ Remove
		Ciudad de Panama, Panama	☐ Change
AMBR			Add
			□ Remove
			Change
AMBR			
			□ Remove
			□ Change
			☐ Remove
			□ Change
			□ Remove
			Change
			Add
			☐ Remove
			☐ Change

•		
•		<del></del>
-		
•		18
		18 AUG 13 AM 10: 43
-		ვ ფ
_		A
		AM 10: 43
-		<u>+3</u>
-		
-		
-		
ranc		
lf an eff	ve date, if other than the date of filing:	nt to 605.020
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ent's effective date on the Department of State's records.	be listed as
ne red The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	earlier o
Dated	August 9th 2018.	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00