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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: WUBBIE APP LLC Name of Limited Liability Company	
. value of Samileo Blacomy Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
RODNEY Friend Name of Person	
WUBBIE APP LLC Firm/Company	
538 HARMON AU.	
Address	
PANAMA City FL. 32401 City/State and Zin Code	
RODNEYMMG @ GMAIL. COM E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
RODNEY Fr. CNP at (850) 8747-0664 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) 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

(Name of the Limited Liability Comp (A Florida Limited	- LC
(A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Company	y were filed on 4-27-16 and assigned
Florida document number <u>L 16000082595</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	538 HARMON AU.
(Principal office address MUST BE A STREET ADDRESS)	PANAMA City FL. 32401
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A SER S
B. If amending the registered agent and/or registered oregistered agent and/or the new registered office address her	
Name of New Registered Agent: RODNE	Y FRIEND
New Registered Office Address: \$38 }	HARMON AV. Enter Florida street address
PARAMA	City Florida 32401 City Zip Code
Naw Degistered Agent's Signature if changing Degistered Agent	·

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>	Name	<u>Address</u>	Type of Action
MGR	Rooney Friend	538 HARMON AY PANAMA CITY FL. 32401	Add
			☐ Remove
			Change
	MIKE ROPA	538 HARMON AV. PANAMAC? PL. 32401	Add
`			Remove
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Filing Fee: \$25.00