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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

Div	ision of Cor	porations					
SUBJECT:	Blockchain Enterprises Pro LLC						
Name of Limited Liability Company							
The enclosed	l Articles of	Amendment and fee(s) are sul	omitted for filing.				
Please return	all correspo	ondence concerning this matter	r to the following:				
		Leonardo Herrera					
			Name of Person				
		Mendez, Molicri & Comp	any				
			Firm/Company				
		2600 S Douglas Road, Sui	• •				
			Address				
		Coral Gables, FL 33134					
		lherrera@moviltechla.com	City/State and Zip Code				
		E-mail address: (	to be used for future annual report notif	ication)			
for further in	formation co	oncerning this matter, please c	all:				
lose Herrera			786 7973861 at ()				
· · · · · · · · · · · · · · · · · · ·	Name of	Person	Area Code Daytime	Telephone Number			
Enclosed is a	check for th	e following amount:					
□ \$25.00 Fi	ling 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:

TO:

**Registration Section** 

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**

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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
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		Fort Lauderdale, FL 33316	
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Filing Fee: \$25.00