## L19000001103

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1883 W. Royal Hunte Dr. Suite 200 Cedar City, Utah 84720 Phone 435-586-9366 Fax 435-586-9491 Andrea Emans, Paralegal andrea@kkoslawyers.com

January 22, 2021

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern:

Enclosed for processing are duplicates of the Articles of Amendment for Ellie Krueger LLC. Also enclosed is a check in the amount of \$25.00 to cover the filing fee.

If you find the enclosed document acceptable, please note your acknowledgment of receipt on the copy and return it to my office with the enclosed return envelope as noted above.

Thank you for your anticipated attention to this matter.

Very truly yours.

## KYLER KOHLER OSTERMILLER & SORENSEN, LLP

Andrea Emans, Paralegal

Enclosure

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ellie Krueger LLC		
( <u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on our records.) mited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Con	pany were filed on 12/27/2018	and assigned
Florida document number L19000001103		<del></del>
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
WRBLO, LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LI.C" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	· · · · · · · · · · · · · · · · · · ·
		3
		. Tour
Enter new mailing address, if applicable:	PSC 567 Box 6773	
(Mailing address MAY BE A POST OFFICE BOX)	FPO, AP 96384	100
		:-
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	Tice address on our records, enter the	name of the new registere
New CN B		
Name of New Registered Agent:		<del></del>
New Registered Office Address:		
	Enter Florida street address	
	Florid	a
	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>	Address	Type of Action
AMBR	Ellie Krueger	12031 Mason Drive	
		Quantico, VA 22134	
AMBR	Michael Krueger	12021 Marin D	Change
Withaut Krueger		12031 Mason Drive	
		Quantico, VA 22134	=Remove
Man			□ Change
MGR Ellie Krueger	Ellie Krueger	PSC 567 Box 6773	
		FPO, AP 96384	<del></del>
			□ Change
MGR Michael Krueger	Michael Krueger	PSC 567 Box 6773	<u> </u>
		FPO, AP 96384	□Remove
			□ Change
			□ Add
			□Remove
			Change
			□ Add
			□Remove
			Change

D. If amending an	y other information, enter change(s) here: (Attach additional sheets, if necessary.)
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E. Effective date, if (If an effective date is <u>Note:</u> If the date is document's effecti	other than the date of filing:  [(optional)]  listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3) inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ve date on the Department of State's records.
If the record specifies a record is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated 20216	10(
-91	
<del></del>	Signature of a member or authorized representative of a member
Ellie Ki	
	Typed or printed name of signee

Filing Fee: \$25.00