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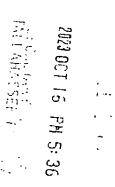
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## **COVER LETTER**

TO: Registration Section Division of Corporations  TO: Registration Section TY
SUBJECT: SKHY Bleu Trust and Holling LLC. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Neshka L. Howard Name of Person
SKHY Blew Trust and Holding, LLC Firm/Company
213 Cushman Street
Pensacola Florida 32505 City/State and Zip Code
Skhyberth@gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Neshka L. Hauard at (850) 549 - 5980  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. \$\Bigcup \$60.00 Filing

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

and Holding LLC  uny as it now appears on our records.) Liability Company)
were filed on OCHODET 13, 2021 and assigned
lity Company," the designation "LLC" or the abbreviation "L.L.C."
213 Cushman Street Pensacola Florida 32505
3001 north Davis Hwy #2201 Pensacola FL 32503
address on our records, enter the name of the new registered
Lushman Street Str. & S

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
MGR	Meshka L. Howard	213 Cushman Street	t&Add
		<del></del>	□Remove
			<b>™</b> Change
			□ Add
			□Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Change of Phincipal address to 213 Cushman Strut Pensards of 32505
Change of Phone # to 850-549-5980
Change of Phincipal address to 213 Lushman Strut Pensard of 132505 Change of Phone # to 850-549-5980 Change of Registeral agent address to 213 Lushman Strut Pinsard of 32505
<del></del>
E. Effective date, if other than the date of filing: October 13, 2021 (optional) (If an effective date is 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)(b)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated October 13, 2023.
Medika h. Howard  Signature of a member or authorized representative of a member 7.
Neshka L. Howard  Typed or printed name of signee