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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT:		WN PROPERTIES LI	_C
SOBJECT.		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Sonia Becerra	
		Name of Person	
		Swyft Filings	
		Firm/Company	
		3 Greenway Plaza #13:	20
		Address	<u>.</u> .
		Houston, TX 77046	
		City/State and Zip Code	·
		mloje1030@icloud.c	
For further information of	e-man address: (concerning this matter, please c	to be used for future annual re	port notification)
	-		
Sonia Becerra		at ()	777-0450
Name c	of Person	Area Code	Daytime Telephone Number
Enclosed is a check for t	he following amount:		
▼ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Add	
Registration Division of C		-	ion Section of Corporations
P.O. Box 632	-		tre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

BLUE CROWN PROPERTIES LLC

2077 JUL 26 AM 10: 29

(<u>Name of the Limited Linbility Compa</u> (A Florida Limited)	iny as it now appears (Liability Company)	on our records.) SECAR	TLAVILL			
(<u>Name of the Limited Limbility Compa</u> (A Florida Limited)		TALL	AHASSET			
The Articles of Organization for this Limited Liability Company	were filed on	11/08/2021	and assigned			
Florida document number L21000482861						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liab	ility company here	:				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the desi	gnation "LLC" or the ab	breviation "L.L.C."			
Enter new principal offices address, if applicable:	255 Primera Bl	vd #160				
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Lake Mary, F	L 32746				
• • • • • • • • • • • • • • • • • • • •	255 Primera l	3lvd #160				
Enter new mailing address, if applicable:						
Lake Many El 22746						
B. If amending the registered agent and/or registered office	address on our rec	ords, enter the nam	e of the new register			
agent and/or the new registered office address here:		<u></u>				
N						
Name of New Registered Agent:						
New Registered Office Address:						
New Registered Office Address.	Enter Florid	a street address				
		, Florida				
	City	· · · · · · · · · · · · · · · · · · ·	Zip Code			
New Registered Agent's Signature, if changing Registered Agent	<u>.</u>					
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete	ree to act in this ca	pacity. I further ago	ree to comply with t			
accept the obligations of my position as registered agent as	provided for in Ch	apter 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 lin	nited 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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Change
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an effective date	e, if other the te is listed, the d	in the date	ceific and	cannot be p	rior to date	of filing or i	nore than 90	days after	filing.) Pursu	ant to 60:	5.020
<u>vote:</u> It the di locument's eff	ate inserted in fective date or	this block do the Departm	es not m tent of St	tate's reco	rds.	atutory IIII	ig require	nents, this	uate will fi	DE DE 11SE	icu a
record specif	ies a delayed e	ffective date,	but not	an effectiv	e time, at	12:01 a.m.	on the ear	lier of: (b)	The 90th	day afte	er th
a is filed.											
Dated	Jul	r. 16	,	2022	رارا						
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Filing Fee: \$25.00