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COVER LETTER

TO: Registration Section
Division of Corporations

WalBlue f	Development LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Luis E Miguel		
		Name of Person	
	Walblue Development LLG	Name of Person spment LLC Firm/Company E HWY #162 Address 33157 City/State and Zip Code om fill address: (to be used for future annual report notification) er, please call: at (
		Firm/Company	
	18495 S. DIXIE HWY #16	52	for filing. following: Name of Person Firm/Company Address /State and Zip Code sed for future annual report notification) at (
		Address	
	Cutler Bay, Fl. 33157		
		City/State and Zip Code	
	Luis@walblue.com		
	E-mail address: (to be used for future annual report not	ification)
For further information	concerning this matter, please c	all:	
Luis E Miguel			
Name	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Addr Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Registration Se Division of Co The Centre of	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WalBlue Development LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 11/22/2021 and assigned Florida document number 1.21000501283 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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 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
AMBR	Luis E Miguel	18495 S. DIXIE HWY# 162	
		CUTLER BAY, FL 33157	□Remove
			□ Change
			□Add
			□Remove
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record specifies a delayed effectiv d is filed.	e date, but not a	ın effective tir	ne, at 12:01 a.:	n. on the earli	er of: (b) The	e 90th day a	ifter the
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Dated	Signature of a m	ember or autho	rized represental	ive of a membe	г	HASSEF FLOR	

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