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(Requestor's Name)				
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(Document Number)				
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08/17/24

COVER LETTER

	egistration Se ivision of Cor				
SUBJECT		ond Development LLC			
SUBJECT	·	Name of Lin	nited Liability Company		
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please retui	m all correspo	ondence concerning this matter	to the following:		
		Sulay Garcia			
			Name of Person		.
		Ayala Law PA			
		-	Firm/Company		
		2490 Coral Way, 4th floor	ī		
			Address		
		Miami, FL 33145			
			City/State and Zip Coo	ie	
		sgarcia@ayalalawpa.com			
For further	information c	E-mail address: (oncerning this matter, please c	to be used for future annuall:	iai report notificati	on)
Sulay Gare			305	570-2208	
	Name o	f Person	at () _ Area Code	Daytime Tel	ephone Number
Enclosed is	a check for th	ne following amount:			
■ \$ 25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fe Certified Copy (additional copy is a		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ailing Addres egistration S			Address: tration Section	n
	_	orporations	_	ion of Corpora	
Р.	O. Box 632	7	The C	Centre of Talla	hassee
Ta	allahassee, I	FL 32314	2415	N. Monroe St	reet, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Blue Diamond 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 $\frac{01/04/2023}{1}$ and assigned Florida document number _____1_23000009573 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) ഗ 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: Ayala Law PA Name of New Registered Agent: 2490 Coral Way, 4th floor New Registered Office Address: Enter Florida street address , Florida 33145
Zip Code Miami Cirv

New Registered Agent 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
			□Add
			□Remove
			□Change
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ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date. If the date inserted in this block does not meet the applicable sta	of filing or more than atutory filing requi	(optional) 90 days after filing.) I rements, this date w	Pursuant to 6	ios.o
ument's effective date on the Department of State's records.				
cord specifies a delayed effective date, but not an effective time, at s filed.	12:01 a.m. on the 6	earlier of: (b) The	90th day at	fter t
ed <u>05/03</u> . <u>2024</u>)			

Filing Fee: \$25.00