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Division of Corporations

# Florida Departmento fistate Of vision of Corporations Electror of Filing flover Sheet

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To:

Division of Componations

Fax Number : (850)617-6383

From:

Account Name : AV ACCOUNTING ASSOCIATES CORP

Account Number : 120220000141 Phone : (954)937-5905 Fax Number : (954)208-0209

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN M BLEU LLC

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Corporate Filing Menu

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TO:

#### **COVER LETTER**

TO: Registration Se Division of Cor				
M BLEU L				
SUBJECT: Name of Limited 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:		
	JUAN S CARVAJAL			
		Name of Person		
		Firm:Company		
		Address	<del></del>	
		City/State and Zip Code		
	E-mail address: (	to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
		at () Area Code Daytin		
Name o	il Person	Area Code Daytin	oe Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	<ul> <li>S60.00 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>	
MailingAddres		StreetAddress:	ection	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, Fl. 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Page: 6 of 8 2023-04-04 20:15:05 GMT 19542080209 From: Alfonso Velez

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M BLEU LLC			
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Lanbility Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000151018</u> .	were filed on 03/24/2023	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the o	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	2101 BRICKELL AVE APT 2405		
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33129		
Enter new mailing address, if applicable:	2101 BRICKELL AVE APT 2405		
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33129		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, enter the nai	me of the new registere	
	City	Zip Code 🚥	

#### New Registered Agent's Signature, if changing Registered Agent:

To:

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.

, Page: 7 of 8 2023-64-04 20:15:05 GMT 19542080209 From. Alfonso Velez

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

To.

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□ Remove
			□Change
			□ Add
			□ Remove
			☐Change
			□Add
			□Remove
			□ Change
		<del></del>	□Add
			□Remove
			Change
			□Remove
		<del></del>	□ Change
			□Remove
			□ Changa

Typed or printed name of signee

JUAN S CARVAJAL