# L24003/1779

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# **COVER LETTER**

TO: Registration ! Division of Co		
	IAN LAB LLC	
SUBJECT:	Name of Lin	nited Liability Company
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.
Please return all corresp	oondence concerning this matter	to the following:
	Jose Pereyra	
		Name of Person
	ZU LLC	
		Firm/Company
	600 N BRoad St, Ste 5 -84	14
		Address
	Middletown, Delaware 19	709
	docs@vulpeinc.com	City/State and Zip Code
		(to be used for future annual report notification)
For further information	concerning this matter, please c	all:
Jose Pereyra		302 4690768 at ( )
Name	of Person	Area Code Daytime Telephone Number
Enclosed is a check for	the following amount:	
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certified Copy (additional copy is enclose
Mailing Addr Registration Division of P.O. Box 63 Tallahassee.	Section Corporations 327	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

BLACKMAN LAB LLC		
(Name of the Limited Liability (A Florida	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on July 12, 2024	and assigned
Florida document number L24000311779	<u>_</u> '	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		····
(Principal office address MUST BE A STREET ADDRI	ESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the	name of the new registere
Name of New Registered Agent:		· <del>-</del>
New Registered Office Address:		
	Enter Florida street address	
	Floric	da
<del></del>	City	Zip Code

### 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
AMBR	RUBIAN B. CIFUENTES	1770 NW 96TH AVE	□Add
		DORAL, FL. 33172	_
			■Change
AMBR	RUBIAN BARRERA C.	1770 NW 96TH AVE	<b>■</b> Add
		DORAL, FL, 33172	□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			Remove
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Effective date, if other than the ofference date is listed, the date must	date of filing:	(optional) r more than 90 days after filing.) Pursuant to ling requirements, this date will not be	605,0207 listed as t
document's effective date on the De	effective date, but not an effective ord is filed.		
document's effective date on the De he record specifies a delayed The 90th day after the reco	effective date, but not an effective ord is filed.		
document's effective date on the De he record specifies a delayed The 90th day after the reco	ord is filed.		rlier of: 2024 원당 1-6
document's effective date on the De he record specifies a delayed. The 90th day after the reco	ord is filed.		2024 AUS 1

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Filing Fee: \$25.00