## 117000244915

(2)		
(кед	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(5)		
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

Office Use Only



500323227405

02/25/19--01030--012 \*\*25.00

7019 FEB 25 PH 6: 50

Anund

MAR 0 4 2019 I ALBRITTON

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KCS 888, LLC	
( <u>Name of the Limited Liability Company</u> (A Florida Limited Lia	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company w	vere filed on 11/29/2017 and assigned
	and assigned
Florida document number L17000244915	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	3 7
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u></u> ं रं
	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered offiregistered agent and/or the new registered office address here:	·
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	City: Zin 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>	Name	Address	Type of Action
MGR	SILVIA ROJAS	8390 SW 72ND AVENUE, 806	<b>\</b> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		MIAMI, FL 33413	□ Remove
			Change
	-		D ∧dd
			□ Remove
		☐ Change	
		D·Add	
			□ Remove
		☐ Change	
			☐ Remove
			□ Change
		□ Add	
		□ Remove	
		Change	
			Add
			Remove
		Change	

	·
E 60	01/17/2010
. <b>Ellec</b> i (If an ef	tive date, if other than the date of filing: 01/17/2019 (optional)  [Continue date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(i
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
docur	nent's effective date on the Department of State's records.
iste 6	remieriemen similien hunteman krosernarian suurumin karaan ka
is an	
Dated	JANUARY 17 2019
	Ja. W. Maka ed D
	Senature of a member or authorized representative of a member
	HOJAT FARAJZADEH

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00