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COVER LETTER

| TO: | Registration Sec Division of Corp | | | |
|----------------|---|---|---|---|
| CUD I | | KONKER | VILLE LLC | • |
| SUBJE | .C1: | <u> </u> | ted Liability Company | |
| | | | | |
| The end | closed Articles of | Amendment and fee(s) are subt | mitted for filing. | |
| Please | return all correspoi | ndence concerning this matter t | to the following: | |
| | | KEVII | Name of Person | E |
| | | KONKER | VILLE LLC Firm/Company | |
| | | 5261 Alk | nambra Drive Address | Apt.10 |
| | | <u>Orlando</u> | FL 32808 | |
| | | MybuSines E-mail address: (1 | FL 32808 City/State and Zip Code Sa Kon Kerville. o be used for future annual report not | Com ification) |
| For furt | ther information co | oncerning this matter, please ca | | |
| | KEVIN Name of | | at (321) 662 | - 0924 ne Telephone Number |
| | Name of | COSOIT | Mea Code Dayun | ic releptione (vultioe) |
| Enclose | ed is a check for the | e following amount: | | |
| □ \$ 25 | 5.00 Filing Fee | S30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is creeksed) |
| | Mailing Address Registration S Division of Co P.O. Box 632 Tallahassee, F | ection orporations 7 | Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI | rporations Callahassee Street, Suite 810 |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| KONKERVII | |
|--|---|
| (Name of the Limited Liability Compan (A Florida Limited Lia | y <u>as it now appears on our records.</u>) ability Company) |
| The Articles of Organization for this Limited Liability Company we Florida document number <u>L 2000296861</u> . | vere filed on $\frac{\dot{0}9/18/2.020}{\text{and assigned}}$ |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liabil | ity company here: |
| | |
| The new name must be distinguishable and contain the words "Limited Liabilit | 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) | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 5261 Alhambia Drive Apt. Orlando, FL 32808 |
| B. If amending the registered agent and/or registered office adapted and/or the new registered office address here: | dress on our records, <u>enter the name of the new registered</u> |
| Name of New Registered Agent: New Registered Office Address: 526/ 4 | A Thambra Drive Aptilo |
| - Orlande | Enter Florida street address Florida Florida Florida Florida |
| New Registered Agent's Signature, if changing Registered Agent: | City Zip Code |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr | erformance of my duties, and I am familiar with and |

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

It 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

| Title 1/c | Name | Address | Type of Action |
|-------------------------------------|----------------------|--|-----------------------|
| resident/Dan ut <u>horized</u> M | emba Kevin Prinville | 5261 Alhambra Drive | 10 Add |
| | AMBR | 5261 Alhambra Drive Orlando, FL 32868 | □Remove |
| | ·- 1 | | □Change |
| Manager | Ferlinda Georges | 5964 Bolling Drive Orlando, FC 32808 | _ 🗹 Add |
| | | Urlando, FC 32808 | □ Remove |
| | | | Change |
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| | | | □Change |

| 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 at date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as | | | | | |
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| e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as | ffective date, if other than the date of filing: | (0 | ptional) | , , | (05.0202 |
| | Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing o | (o | ptional) ifter filing.) | D D Pursuant to | - 6 li |
| | record specifies a delayed effective date, but not an effective time, at 12:01 a.r. is filed. | m. on the earlier of | (b) The | 90th day | after the |
| cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the | | | | | |
| | ated January 20, 2021 | 1 | | | |
| | $V \sim 11/1$ | <i>()</i> | | | |
| Tanuary 20, 2024 Kerin Prinvillo | Signature of a member of authorized representation | ye of a member | | | - |
| | Signature of a member or authorized representation | Here of a member | | <u></u> | - |

Filing Fee: \$25.00