107000110284

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COVER LETTER

	egistration Sec ivision of Corp				
SUBJECT		KING MANAGEMENT LLC			
	•	Name of Lim	ited Liability Company		-
The enclos	ed Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please retu	m all correspon	ndence concerning this matter	to the following:		
		Mark C. Alhadeff			
			Name of Person	, <u>.</u>	_
		The Alhadeff Law Group			
			Firm/Company		
	11900 Biscayne Blvd. Suite 289				
			Address	·	 -
		North Miami, FL 33181			
			City/State and Zip Code		iling Fee, ate of Status & I Copy
		Mark@alhadefflaw.com			
		E-mail address: (to be used for future annual re	eport notification)	-
For further	information co	oncerning this matter, please co	all:		
Mark C. A	lhadeff		786 6189	9703	
	Name of	Person	at () Area Code	Daytime Telephone Numb	oer
Enclosed is	a check for the	e following amount:			
⅓ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certific (sed) Certific	Filing Fee, cate of Status & ed Copy tal copy is enclosed)
	ailing Address		Street Ado	Iress:	

Registration Section **Division of Corporations** P.O. Box 6327

Tallahassee, FL 32314

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

FILED

M&M PARKING MANAGEME	NT LLC	2021 OCT 21 AM 10: 51
(Name of the Lim	ited Liability Co	ompany as it now appears on our records.)
The Articles of Organization for this Limited Florida document number L07000110284	Liability Comp	pany were filed on 10/31/2007 OF STATE and assigned
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited	liability company here:
n/a		
The new name must be distinguishable and contain the	words "Limited 1	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	n/a
(Principal office address MUST BE A STRE	ET ADDRESS	0
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		n/a
(Mailing address MAY BE A POST OFFICE	E BOX)	
B. If amending the registered agent and/or agent and/or the new registered office addr	registered off <u>ess here</u> :	ice address on our records, enter the name of the new regis
Name of New Registered Agent:	n/a	
New Registered Office Address:	n/a	
		Enter Florida street address
	n/a	, Florida ^{n/a}
		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 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
VP	John Daniels	1100 SE 14 Street, Deerfield FL 33441	= Add
			□Remove
			□Add
			□Remove
			□ Change
			□Add
			□ Remove
			□Change
			□Add
			□ Remove
			□Change
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	n/a
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ote:	ive date, if other than the date of filing:
recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
	TUESDAY OCTOBER 19TH 2021
,	
ated	
ated	
ated	Signature of a member or authorized representative of a member

Filing Fee: \$25.00