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(Requ	estor's Name)	
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Certified Copies	Certificates	s of Status
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COVER LETTER

	stration Section of Corp					
	RANKLIN	DESIGN - A KMP / KMF JO	DINT VENTURE LLC			
SUBJECT: _		Name of Lim	ited Liability Company			
The enclosed /	Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return a	II correspon	dence concerning this matter	to the following:			
		JOE MORGAN				
		KZF DESIGN LLC DBA I	Name of Person KPM ARCHITECTS			
		1401 EDGEWATER DRIV	Firm/Company			
		ORLANDO, FL 32804	Address			
		JOE@KMFARCHITECTS.	City/State and Zip Code COM			
For further info	ormation cor	E-mail address: (i	to be used for future annual report notificat	ion)	7978 RGY	macy n
JOE MORGAI			407 298-1988 at ()	第5 22 23	21	general Services Services
	Name of I	Person	Area Code Daytime Te	lephone Number	PH 1: 2:	<u>}</u> 1
Enclosed is a c □ \$25.00 Fili		following amount: □ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee Certificate of St Certified Copy (additional copy is a	atus &	

MAILING ADDRESS:

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FRANKLIN DESIGN - A KMP / KMF JOINT VENTURE LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited I	Liability Company	were filed on <u>07/07/2008</u> , Amend 10/3	0/2018 an	d assi	gned
Florida document number L02000014378	·				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liab	ility company here:			
FRANKLIN DESIGN - A KPM / KMF JOINT V	ENTURE LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviatio	n "L.I	C."
Enter new principal offices address, if applicable:		NO CHANGE			
(Principal office address MUST BE A STREA	ET ADDRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u> </u>	NO CHANGE			
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:			r the ma	I Z AON BLUM	STEET STEET
New Registered Office Address:		Enter Florida street address , Florida City	Zip C	PK : 2 Dode	THAT

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, <u>enter the title, name, and address of each person_being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
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			Add
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NOTE THIS AMENDMENT ONLY CHANGE	ES THE INITIALS	KMP TO KPM. AL	L ELSE REMAD	NS SAME
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ecord specifies a delayed effective date le 90th day after the record is filed.				ine earlie
/				
d Nov. 20	2018			
Joseph H. MORGA				
Google to Morge	<u> </u>			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00