L09000072720

(Requestor's Name)
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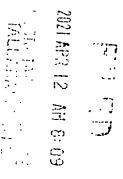


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COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

	Registration Sec Division of Corp				
cup us		IMITED, LLC			
SUBJEC	1:	Name of Lim	ited Liability Company		
The enclo	sed Articles of a	Amendment and fec(s) are sub	mitted for filing.		
Please ret	urn all correspon	ndence concerning this matter	to the following:		
		Karsten S. Weber			
			Name of Person		
		KSSR Unlimited, LLC			
			Firm/Company		
		1304 Otters View Ct.			
			Address		
		Fruitland Park, FL 34731			
			City/State and Zip Code		
		pododoc7@gmail.com	to be used for future annual report notification)		
					26
For furthe	er information co	oncerning this matter, please c			<u> </u>
Karsten S	S. Weber		352 205-3000 at ()		10 10
	Name o	f Person	Area Code Daytime Telephone Number	;	12
					3
Enclosed	is a check for th	ne following amount:		r	8: O
■ \$25.0	00 Filing Fee	□ \$30,00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ling Fee) te of Statu	Ф s &
	Mailing Addres Registration S		Street Address: Registration Section		
	Division of C		Division of Corporations		

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
ne Articles of Organization for this Limited Liability Company orida document number L09000022720	
is amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liab	ility company here:
ak Real Estate Holdings, LLC	
e new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "L.L.C." or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
rincipal office address MUST BE A STREET ADDRESS)	
nter new mailing address, if applicable: <u>Jailing address MAY BE A POST OFFICE BOX)</u>	
If amending the registered agent and/or registered office a tent and/or the new registered office address here:	address on our records, <u>enter the name of the new regi</u>
Name of New Registered Agent:	22
New Registered Office Address:	ZII - ZII

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.

New Registered Agent's Signature, if changing 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
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. Effective date, if other than the date of filing:	(optional)	5 4205 42VA
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	quirements, this date will not be lis	ted as the
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t cord is filed.	he earlier of: (b) The 90th day aft	er the
Dated April 7th 2021		

Filing Fee: \$25.00

Typed or printed name of signee