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SECREFARY OF STATE OF STATE OF CORPORATION OF CORPORATION STATE OF STATE OF

T. MATTHEWS APR 2 8 2022 TO: Registration Section

Division of Corporations			
	oldings, LLC		
SUBJECT:	Name of Lim	ited Liability Company	<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Christian Thompson		
		Name of Person	"
	The Franchise & Business Law Group		
		Firm/Company	
	222 S Main Street, Suite 5	00	
		Address	
	Salt Lake City, UT 84101		
		City/State and Zip Code	
	cthompson@fblglaw.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Christian Thompson		801 575-5001 at ()	
Name o	of Person		ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 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 enclosed)
Mailing Addre Registration Division of O P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Cor The Centre of 7 2415 N. Monro Tallahassee, FL	rporations Fallahassee he Street, Suite 810

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF STATE OF STATE OF STATE OF CORPORATIONS

22 APR 11 AM ID: 55

Kenjam Holdings, LLC

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

The Articles of Organization for this Limited Liability Cor Florida document number L10000039274	ompany were filed on April 12, 2010 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ted liability company here:
The new name must be distinguishable and contain the words "Limite	ited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	ESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
., 5	l office address on our records, <u>enter the name of the new regis</u> t
Name of New Registered Agent:	l office address on our records, <u>enter the name of the new regis</u>
agent and/or the new registered office address here:	I office address on our records, enter the name of the new regist

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.

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It amending Authorized rerson(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
Mgr	Robert Marcus	42164 West Rummy Road	
		Maricopa, Arizona 85138	
			Change
			□Add
			🔲 Remove
			Change
	·		
			□Remove
			Change
			□Add
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			□Change
			□ Add
			Remove
			□ Change

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	ust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 block does not meet the applicable statutory filing requirements, this date will not be listed as the
e record specifies a delayed effec rd is filed.	ive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated April 8	2022
Clenstian Thom	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
Christian Thompson	
	Typed or printed name of signee