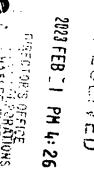
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
	. 10: 1 E: E:	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(B)	usiness Entity Name)	
(50	Siness Charly Harrio,	
(De	ocument Number)	
red Copies	Certificates o	f Status
⊶al Instructions to Fili	ng Officer:	
		AB
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Office Use Only



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A. BUTLER FEB - 2 2023



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	02/01/2023				
Name:	Janelle Davis				
	#:1897416	-			
	e: KTS HOLDINGS	R INVESTMENTS, LLC			
☐ Artic	les of Incorporation/Authorization Indment Inge of Agent Istatement				
☐ Conversion ☐ Merger					
□ Dissolution/Withdrawal□ Fictitious Name□ Other					
Authorized	Amount: \$25.00				

F: 800.944.6607

DocuSign Envelope ID: 962E1237-F99E-4355-B157-821E438D59A2

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KTS Holdings & Investments, L1			
(Name of the Limi	ted Liability Company as (A Florida Limited Liabilit	it now appears on our records.) (y Company)	
The Articles of Organization for this Limited I. Florida document number L10000089887		filed on August 26, 2010	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability c	company here:	
The new name must be distinguishable and contain the	words "Limited Liability Co	mpany," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	BOX)		
water to the second sec		<u> </u>	
B. If amending the registered agent and/or agent and/or the new registered office addre		ess on our records, <u>enter the</u>	name of the new registere
Name of New Registered Agent:	Cogency Global Inc.		
New Registered Office Address:	115 North Calhoun S	Street, Suite 4	
1.5 Weginered Ville Hadress.		Enter Florida street address	
	Tallahassee	, Floric	da <u>32301</u>
		Tigy	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.

/s/ Eric Hood	_
If Changing Registered Agent, Signature of New Registered Agent	

DocuSign Envelope ID. 962E1237-F99E-4355-B157-821E438D59A2
Trainenting 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>	<u>Address</u>	Type of Action
MGR	TASC Management LLC	2212 N. Burling Street	= Add
		Chicago, Illinois 60614	□Remove
			□Change
MGR CJB Manageme	CJB Management, LLC	701 S. Howard Avenue, Suite 106-322	🗆 Add
		Tampa, Florida 33606	■Remove
			□Change
			□Add
			□Remove
			☐Change
			□Add
			□Remove
			Change
			□Remove
			□ Change
		 	□ Add
			□Remove
			□Change

Typed or printed name of signee

Thomas Gallagher