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COVER LETTER

TO:

TO: Registration So Division of Cor			
KGF-300	O LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for tiling.	
Please return all correspo	ondence concerning this matter	to the following:	
	GREGORY T. FURNAS		
		Name of Person	
	KGF-300 LLC		
		Firm/Company	
	300 S BAY STREET		
	· 	Address	
	EUSTIS. FL 32726		
		City/State and Zip Code	, , , , , , , , , , , , , , , , , , ,
	GFURNAS1@GMAIL.CO		
For further information c	E-mail address: (oncerning this matter, please c	to be used for future annual report noti all:	fication)
GREGORY T. FURNAS	-	352 455-4576 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration 9		<u>Street Address:</u> Registration Sec	ction
Division of C		Division of Cor	
P.O. Box 632	.7	The Centre of T	
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KGF-300 LLC

company has been notified in writing of this change.

2022 JUH 27 AM 7: 11

(Name of the Limited Liability Company (A Florida Limited Lia	'as it now appea bility (Company)	irs on our records.)		!
				, "[
The Articles of Organization for this Limited Liability Company w	ere filed on _	11/30/2011	and assigned	d
Florida document number				
(Name of the Limited Liability Company 3.it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on				
A. If amending name, enter the new name of the limited liabili	ty company h	<u>ere</u> :		
The new name must be distinguishable and contain the words "Limited Liability	Company," the	designation "LLC" o	r the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		<u>.</u>		
(Principal office address MUST BE A STREET ADDRESS)	_			
Enter new mailing address, if applicable:		 		
(Muiling address MAY BE A POST OFFICE BOX)				
				
	dress on our	records, <u>enter th</u>	e name of the new reg	<u>iste</u>
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Fle	rida street address		
		Flori	da	
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete peacept the obligations of my position as registered agent as pro	erformance o	f my duties, and	I am familiar with and	d

being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

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
MGRM	KATY R. FURNAS	11220 LAKE EUSTIS DRIVE	
		LEESBURG, FL 34788	■ Remove
			☐ Change
			□ Add
			Remove
			□Change
			Change
			□Add
			□Remove
			Change
			□Add
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	date, if other the	date must be specific this block does r	c and cannot be prio not meet the applic	r to date of filing or meable statutory filin	optione than 90 days after g requirements, thi	onal) (filing.) Pursuant to 605 (s date will not be list	5.02 .ed :
i effecti <u>te:</u> [f]	t's effective date o	•					
n effecti te: If (cument ecord s	or's effective date of pecifies a delayed		i not an effective t	ime, at 12:01 a.m.	on the earlier of: (b) The 90th day afte	r th
n effecti (te: If) cument ecord s is filed.	or's effective date of pecifies a delayed		2022	ime, at 12:01 a.m.	on the earlier of: (b) The 90th day afte	er th
n effecti ote: If (cument	t's effective date o pecifies a delayed		2022	ime, at 12:01 a.m.		The 90th day afte	er th