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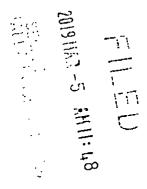
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COVER LETTER

SUBJECT: KRC BUSINESS ENTERPRISES LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Virginia Rodeghero Name of Person
KRC BUSINESS ENTERPFISES LLC Firm/Company
1002 Jeffords St Address
Clearwater FL 3:3756 City/State and Zip Code
E-mail address: No be used for future annual report notification)
For further information concerning this matter, please call:
Vicana Rodeyhoro at (727) 442-3363 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
© \$25.00 Filing Fee

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

(Name of the Limited Liabi (A Florid		it now appears on ty Company)	our records.)	
The Articles of Organization for this Limited Liability	• •	filed onQ \	11/12	and assign
Florida document number <u>L12000 (16403</u>	 -			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability (company here:		
The new name must be distinguishable and contain the words "Lin	mited Liability Co	mpany," the design	ation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD	RESS)			
			ه یا به د مر	5 1
Enter new mailing address, if applicable:				is it
(Mailing address MAY BE A POST OFFICE BOX)				主て
				9
B. If amending the registered agent and/or registered agent and/or the new registered office add		address on our	records, <u>ente</u>	the name of the
Name of New Registered Agent:	Virgin	10 Rode	ghero	
New Registered Office Address:	1002	Enter Florida st	S ST reet address	
	Clear	vater City	, Florida _	33756 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person be or removed from our records:

MGR =	Manager	
AMBR =	Authorized M	ember

<u>Title</u>	Name	Address	Type of A
			Add
			□ Remov
			
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(If an effecti Note: If	date, if other than the date of filing:
the recor) The 90	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.
Dated	27 Feb 2019
	Vision W Kodentow
	Signature of a member or authorized representative of a member
	Virginia Roderinero
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00