

L13000141927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

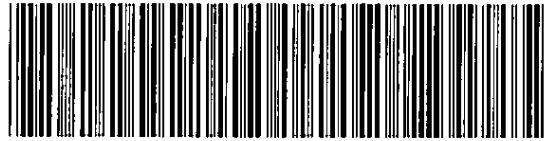
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300403532423

2023 APR 13 10:58 AM

FILED

2023 APR 13 AM 10:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 13 2023

D CONNELL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: K Squared Holdings 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:

Talia Krugman-Kadi

Name of Person

K Squared Holdings LLC

Firm/Company

204 37th Street N #124

Address

St. Petersburg, FL 33704

City/State and Zip Code

Taliaksquared@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Talia Krugman-Kadi

Name of Person
352 870-0618
at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for the 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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
244 E. Adams Street, Room 2010
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

K Squared Holdings LLC

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

The Articles of Organization for this Limited Liability Company were filed on 10/08/2013 and assigned
Florida document number L13000141927.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

834 E University Ave

Gainesville, FL 32601

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

204 37th Street N

#124

St. Petersburg, FL 33704

FILED
2023 APR 13 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Christopher Kelly - Brigand Solutions LLC

New Registered Office Address:

8691 Sommerset Drive

Enter Florida street address

Largo

City

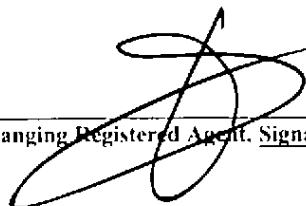
Florida 33773

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 being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Talía Krugman-Kadi	204 37th Street N	<input type="checkbox"/> Add
		#124	<input type="checkbox"/> Remove
		St Petersburg, FL 33704	<input checked="" type="checkbox"/> Change
MBR	Susan Krugman-Kadi	1920 SW 44th Ave	<input type="checkbox"/> Add
		Gainesville, FL 32608	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

2023

Signature of a member or authorized representative of a member

Talia Krugman-Kadi

Typed or printed name of signee