

L14000161567

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

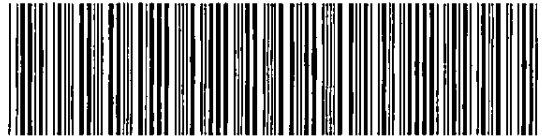
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Special Instructions to Filing Officer:

J. HORNE
SEP - 4 2024

Office Use Only



800432336368

FILED

2024 SEP - 6 AM 10: 11

RECEIVED

2024 SEP - 6 PM 4: 23

CLERK OF COURT
CLERK OF COURT
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FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DR
TALLAHASSEE, FL 32309

(850) 491-9625 Brandon

(850) 524-5437 Teresa

(850) 524-6243 Rich

Please use funds from account: I20210000160: \$30.00

Authorization Signature: 

Business Name: KSM Holdings Florida, LLC

Document # L14000161567

Certified Copy

☒ Certificate of Status

NEW FILINGS

&

AMENDMENTS

- ☐ Profit Corp
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ LLLP
- ☐ Corp
- ☐ Inc
- ☐ Other

- ☒ **Amendment**
- ☐ Resignation / Dissociation
- ☐ Change of Registered Agent
- ☐ Dissolution for LLC
- ☐ Merger
- ☐ Articles of Conversion
- ☐ Amended & Restated Articles of Incorporation
- ☐ Statement of Authority

APOSTILLE(s)

&

OTHER FILINGS

- ☐ Apostille(s)
- ☐ Country(s)

- ☐ Foreign Filing
- ☐ Reinstatement
- ☐ Qualification
- ☐ Fictitious Name
- ☐ Annual Report

EXAMINER'S INITIALS: _____

FLORIDA CAPITAL COURIER SERVICES, INC

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TALLAHASSEE, FL 32309

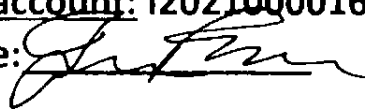
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: KSM Holdings Florida, 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:

Makino, Kathy

Name of Person

KSM Holdings Florida, LLC

Firm/Company

3175 South Congress Avenue 310

Address

Palm Springs FL 33461

City/State and Zip Code

kathy@shelbornedevelopment.net

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

For further information concerning this matter, please call:

Makino, Kathy S

734 905-8323

at ()

Name of Person

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
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

KSM Holdings Florida, LLC

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

FILED

2024 SEP -6 AM 10:12

The Articles of Organization for this Limited Liability Company were filed on October 16, 2014 and assigned
Florida document number 114000161567.

This amendment is submitted to amend the following:

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

N/A

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

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

Florida

City

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>
MBR	Kathy S. Makino	3175 S. Congress Ave 310 Palm Springs, FL 33461	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Harry S. Leipsitz Trust	759 Lake Shore, Grosse Pointe Shores, MI 48236	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Stephen Toyra	347 Franklin Ave, River Forest IL 60305	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Jack Pettinger	347 Franklin Ave, River Forest IL 60305	<input checked="" 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

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

This is a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: 9/9/24 (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated 9/6/ 2024

Signature of member or authorized representative of _____

Signature of member or authorized representative of a member

Kathy Makino-Leipsitz

Typed or printed name of signee