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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: KIRK J MAURO 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:
Name of Person
KIRKJ MAURO LLC Firm/Company
3135 PERSIMMON DRIVE
City/State and Zip Code  City/State and Zip Code  City/State and Zip Code  City/State and Zip Code  E-mail-address: (to be used for future annual report notification)
f:-mair-sadress; (to be used for future annual report notification)  For further information concerning this matter, please call:
Devey JeHon at (850) 627-9528  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  S60.00 Filing Fee, Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section **Division of Corporations** P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 AUG 25 AM 9: 21 KIRK J MAURO LLC

(Name of the Limited Liability Company as it now appears on our records SELLE LARY OF STATE

(A Florida Limited Liability Company)

TALLAHASSEE, FL The Articles of Organization for this Limited Liability Company were filed on 10/02/2015 and assigned Florida document number 15000168102 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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: DIANE MAURO Name of New Registered Agent: 3135 PERSIMMON DRIVE New Registered Office Address: Enter Florida street address TALLAHASSEE Florida 32312

## 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>	Address	Type of Action
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