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JAN 04 S. PRATHER

COVER LETTER

TO: Registration Section Division of Corporations

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KW MORGAN GROUP, LLC

SUBJECT: _____

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:

JENNIFER B. THOMAS, ESQ.

Name of Person

THOMAS ESTATE LAW, PLLC

Firm/Company

200 SOLANA ROAD, SUITE B

Address

PONTE VEDRA BEACH, FL 32082

City/State and Zip Code

JENNIFER@THOMASESTATELAWPLLC.COM

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

For further information concerning this matter, please call:

JENNIFER B. THOMAS

Name of Person

904 373-8748 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)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> 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

KW MORGAN GROUP, LLC		-
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)		N
(A Florida Limited Liability Company)	-	Ch.
The Articles of Organization for this Limited Liability Company were filed on <u>May 6, 2016</u>	and as	£" signed
florida document number		- ,
This amendment is submitted to amend the following:		L.
A. If amending name, enter the new name of the limited liability company here:		
Shelley B. Morgan, LLC		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or t	he abbreviation "L	
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)		
	6.41	
B. If amending the registered agent and/or registered office address on our records, <u>enter the lagent and/or the new registered office address here</u> :	name of the new	w regis
Name of New Registered Agent:		
New Registered Office Address:		
Enter Elected a strange address		

Enter Florida street address

_____. Florida _____ Zw Code

È.

ij,

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			🗆 Add
			🗆 Remove
			□ Change
			□ ∧dd
			🗆 Change
			🗆 Add
			🗆 Remove
			🗆 Add
			🗆 Remove
			□Change
			🗆 Add
			🗆 Remove
			Change
			🗆 Add
			□Change

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

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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 $11 - 14 - 34$		1 kcU3
Steen B. Morgan		
Signature of a member or authorized representative of a member I	•	<u>-</u> :
Chiped or printed name of signee		ت