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COVER LETTER

TO:	Registration Se Division of Cor			
		NDERS, LLC	· .	
SUBJE	ECT:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	indence concerning this matter	to the following:	
		Timo A. Becker, Esq.		
			Name of Person	
		Timo A. Becker, P.A.		
			Firm/Company	
		1395 Brickell Ave, Suite 8	00	
			Address	
		Miami, FL 33131		
		info@beckerinternationalla	City/State and Zip Code w.com	
		E-mail address: (to be used for future annual report not	ification)
For fur	ther information c	oncerning this matter, please c	all:	
Timo A	A. Becker, Esq.		303 9566938 at ()	
	Name o	f Person		ne Telephone Number
Enclose	ed is a check for th	ne following amount:		
■ \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres		Street Address:	
	Registration S		Registration Se	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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**

ART	ICLES OF (O ORGANIZATION OF	on the se
KINU GRINDERS, LLC			
(<u>Name of the Limi</u> t	ed Liability Comp (A Florida Limited	any as it now appears on our records. Liability Company)	i i i i i i i i i i i i i i i i i i i
The Articles of Organization for this Limited L Florida document number 1.17000117995	iability Company	were filed on <u>05/30/2017</u>	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name o	f the limited liab	oility company here:	
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	1395 Brickell Ave	
(Principal office address MUST BE A STREE	T ADDRESS)	Suite 800	
		Miami, FL 33131	
Enter new mailing address, if applicable:		1395 Brickell Ave	
Mailing address MAY BE A POST OFFICE I	BOX)	Suite 800	
		Miami, FL 33131	
B. If amending the registered agent and/or re agent and/or the new registered office addres	egistered office a <u>s here</u> :	nddress on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:	Timo A. Becker	r, P.A.	
New Registered Office Address:	1395 Brickell A	ve, Suite 800	
		Enter Florida street address	

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 United liability company has been notified in writing of this change.

City

Miami

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

Title	<u>Name</u>	Address	Type of Action
	Michel Nedeff	920 Coral Way	□Add
		Coral Gables, FL 33134	■ Remove
		USA	
MGR	Christian Biernatek	Borsigstrasse 41	_
		63110 Rodgau	
		Germany	
			□Add
			□Remove
			□Change
			□Remove
		-	□Remove
			□ Change
			□Add
			□Remove
			□Change

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Effective date, if other than I an effective date is listed, the date Notes, if the date invested by the	the date of filing:	annat ha najar ta	data of filing or own	(option	ial)
<u>riote.</u> It the date inserted in th	is diock daes not me	et the applicab	le statutory filing	requirements, this	late will not be listed as
focument's effective date on the	ie Department of Sta	le's records.			
e record specifies a delayed effe	retive date, but not a	n offactive time	sat 17:01 n.m. o	i tha andiay at the	The post star and a
d is filed.	, or , or all the first the	TOTICCTIVE CITIC	., at 12.01 a.m. ti	raic carrier (1, (b)	the 90th day after the
		2020			
lune U		2(12()			
Dated June 9					
Dated	J. Polewale	u			
Dated	F. Pole yale	U mber or authoriz	ed representative o	i member	

Filing Fee: \$25.00