

**L1700023602**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : LEGALZOOM.COM INC.  
Account Number : 120010000062  
Phone : (323) 962-8600  
Fax Number : (323) 962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
KLASS ACT SOLUTIONS, LLC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 06      |
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2019 DEC 19 PM 1:58  
TALLAHASSEE, FLORIDA

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2019 DEC 19 PM 2:04

DEC 20 2019  
T. LEMIEUX

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: KCLASS ACT SOLUTIONS, LLC**

State 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:

Cheyenne Moseley

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N Brand Blvd 11th Fl

Address

Glendale, CA 91203

City/State and Zip Code

robbin.kruef@kclasssolutions.com

Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheyenne Moseley

800 775-0888

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$50.00 Filing Fee &  
Certificate of Status

\$55.00 Filing Fee &  
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(additional copy is necessary)

\$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 32311

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Cifton Building  
2601 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KLASS ACT SOLUTIONS, 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 11/15/2017 and assigned Florida document number: L17000236022

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:

7341 Office Park Place Ste. 202

(Principal office address MUST BE A STREET ADDRESS)

Melbourne, FL 32940

Enter new mailing address, if applicable:

7341 Office Park Place Ste. 202

(Mailing address MAY BE A POST OFFICE BOX)

Melbourne, FL 32940

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

Name of New Registered Agent:

New Registered Office Address:

7341 Office Park Place Ste. 202

Enter Florida street address

Melbourne

Florida

City

32940

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

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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>                      |
|--------------|--------------|---------------------------------|--------------------------------------------|
| AMBR         | Robbin Kruei | 7341 Office Park Place Ste. 202 | <input type="checkbox"/> Add               |
|              |              | Melbourne, FL 32940             | <input type="checkbox"/> Remove            |
|              |              |                                 | <input checked="" type="checkbox"/> Change |
| AMBR         | Kurt Kruei   | 7341 Office Park Place Ste. 202 | <input type="checkbox"/> Add               |
|              |              | Melbourne, FL 32940             | <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            |

