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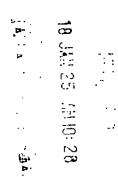
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(Cit	ty/State/Zip/Phone	: #)
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		
(Bu	isiness Entity Nan	ne)
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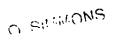
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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	KAYLUX	LLC		
50051.		Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please i	return all correspo	ndence concerning this matter	to the following:	
		Katia Nunez		
			Name of Person	
		KAYLUX LLC		Daytime Telephone Number & \$60.00 Filing Fee, Certificate of Status &
		-	Firm/Company	
		275 East 45th St		
			Address	
		Hialeah, FL 33013		
		kathayasofi14@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report notific	cation)
For furt	her information c	oncerning this matter, please ca	all:	
Katia N			786 223-4113	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
□ \$25	i.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy

MAILING ADDRESS:

TO:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KAYLUX LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on January 16, 2018	and assigned
Florida document number L18000013749		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here;	
KAYD'LUX LLC		
The new name must be distinguishable and contain the words "Limited I	liability Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	0	
Enter new mailing address, if applicable:		(3
Mailing address MAY BE A POST OFFICE BOX)		
		28
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on our records, <u>en</u> <u>here</u> :	ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			
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ctive date, if other than the c	late of filing:			(ont	rional)	
ctive date, if other than the ceffective date is listed, the date must in this blooment's effective date on the Department's effective date on the Department.	ck does not mee	t the applicable	late of filing or me e statutory filing	re than 90 days attered requirements, the	er filing.) Pursuant iis date will not b	to 605,0 pe listed
poord engelfies a delayed	offortion det	a h.,, t t -	- 			4.
ecord specifies a delayed ne 90th day after the reco	rd is filed.	e, DUL NOC a	n enective ti	me, at 12:01	a.m. on the e	earlier
January 22nd		2018				
	2/1					
4	T. Clark		ed representative			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00