

L18600056934

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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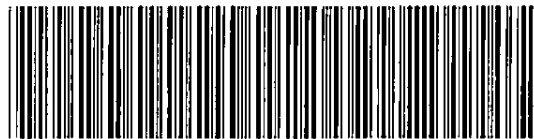
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KNEX 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:

JAMES J. DEL SORDO
Name of Person

KNEX LLC
Firm/Company

241 31ST ST NW
Address

NAPLES, FL 34120
City/State and Zip Code

JJ.DELSORDO@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAMES J. DEL SORDO at (239) 564.3807
Name of Person 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)

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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CLERK OF STATE
TALLAHASSEE, FL 32303

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

KNEX 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 03/05/2018 and assigned
Florida document number L18000056934.

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:

Name of New Registered Agent:

JAMES J. DEL SORDO

New Registered Office Address:

241 31st ST NW

Enter Florida street address

NAPLES

City

Florida

34120

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>
MGR	Tyler J. Gyorkos	14413 Tuscanly Pointe Trail	<input type="checkbox"/> Add
		Naples, FL 34120	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	James J. Del Sordo	241 31 st St NW	<input type="checkbox"/> Add
		Naples, FL 34120	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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SECRETARY OF STATE
CLERK OF SUPERIOR COURT
CLERK OF DISTRICT COURT
CLERK OF COUNTY COURT
CLERK OF JUDICIAL CIRCUIT
CLERK OF PROBATE COURT
CLERK OF TRAFFIC COURT
CLERK OF SMALL CLAIMS COURT
CLERK OF JUVENILE COURT
CLERK OF MENTAL HEALTH COURT
CLERK OF ESTATE COURT
CLERK OF PROBATE AND VITEL
CLERK OF APPELLATE COURT
CLERK OF SUPREME COURT

FILED

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated Dec 3, 2024

Signature of a member or authorized representative of a member

James J. Del Sordo
Typed or printed name of signer

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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