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To:		DEC
	Division of Corporations	<u> </u>
	Fax Number : (850)617-6383	မ် ကြ
From:		AM
	Account Name : REGISTERED AGENTS INC.	
	Account Number : I20090000081	Ö 🗄
	Phone : (307)200-2803	- 3
	Fax Number : (855)330-1010	- <b>-</b>

Enter the email address for this business ent. annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KARL V. MIGUEL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Karl V. Miguel, LLC (Name of the Limited Liability Compr (A Florida Limited)	Iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L18000078374	were filed on 04/01/18 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liah	ility company here:		
KVM Enterprise, LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L L.C."		
Enter new principal offices address, if applicable:	7901 4th St N STE 300 St. Petersburg, FL 33702		
(Principal office address MUST BE A STREET ADDRESS)			
	7901 4th St N STE 300		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	St. Petersburg, FL 33702		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registerec</u>		

New Registered Office Address:	7901 4th St N STE 30	0
New Regimered While Hulliegs.	Enter Flor	rida street address
	St. Petersburg	, Florida 33702
	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, <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	<u>Type of Action</u>
AMBR	MIGUEL, KARL V	7901 4th St N STE 300	🗆 Add
		St. Petersburg, FL 33702	Remove
			X Change
			🗆 Add
			<ul> <li>Add</li> <li>Remove</li> <li>Change</li> <li>Add</li> <li>Remove</li> <li>Change</li> <li>Add</li> <li>Remove</li> <li>Change</li> <li>Remove</li> </ul>
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E. Effective date, if other than the date of fi (If an effective date is listed, the date must be specific <u>Note:</u> If the date inserted in this block does n document's effective date on the Department	and cannot be prior t ot meet the application	ible statutory fil	more than 90 days a	otional) fter filing.) Pursuant this date will not	i to 605 0207 (3)(b) be listed as the
If the record specifies a delayed effective date, but record is filed.	not an effective ti	ne, at 12:01 a.m	. on the earlier of	: (b) The 90th di	iy after the
Dated December 13	2021	·			
	of a member or autho	A.			
Signature o	of a member or autho	rized representati	ve of a member		

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

Typed or printed name of signee

Morgan Noble