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•	C	OVER LETTER
то:	Registration Section Division of Corporations	
SUBJE		L C d Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kyle Smith Name of Person Firm/Company 7550 Panthera Ct Address Orlando FL 32822 City/State and Zip Code Ky/c O kar + whee///c. com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kyle Smith	at (407) 405-7667	
J Name of Person	Area Code Daytime Telephone Number	

Enclosed is a check for the following amount:

X \$25.00 Filing Fee

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□ \$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/COURIER ADDRESS:

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

ARTICLES OF A	
ARTICLES OF O	RGANIZATION FILED
(Name of the Limited Liability Compar (A Florida Limited L	2019 JAN -7 PM 4:40 C <u>ANATE</u> (ability Company) TALLAHASSEE, FL
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000110817</u> .	were filed on $5/02/2018$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabi</u> <u>Cart Kings</u> <u>LLC</u> The new name must be distinguishable and contain the words "Limited Liabili	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ISSO Panthera Ct Orlando FL 32822
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent: Kyle,	Smith
V	enter Florida street address
Orland	0 Florida 32822

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.

Kyh Smith angely Registered Agent, <u>Signature of New Registered Agent</u>

City

If Chan

Zip Code

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

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E. Effective date, if other than the date of filing: ____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) 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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated Jonusry 3 2019 Kyh Swith Signature of a member or authorized representative of a member

Kyle Smith Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00