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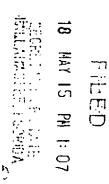
(Re	questor's Name)	
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COVER LETTER

		stration Sect sion of Corp							
CUBICO		K.O. CONST	TRUCTION & RESTORATION	ON SERVICES, LLC					
SUBJEC	1; .		Name of Limi	ited Liability Company					
The enclo	osed	Articles of A	mendment and fee(s) are sub-	mitted for filing.					
Please ret	turn ;	all correspon	dence concerning this matter	to the following:					
			ALI KHANSA						
				Name of Person	 				
			K.O. CONSTRUCTION &	RESTORATION SERV	ICES, LLC				
				Firm/Company					
			6999-02 MERRILL RD. SUITE 191						
			Address						
			JACKSONVILLE FL 3227	די					
			City/State and Zip Code						
			ALIKHANSA@LIVE.COM						
For furthe	er int	ormation cor		o be used for future annual r	report notification)				
				904 655	5-1555				
	further information concerning this matter, please call: KHANSA								
Enclosed	is a	check for the	following amount:						
\$25.0	0 Fil	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is encl	losed) (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 AMENDMENT TO ARTICLES OF ORGANIZATION OF

K.O. CONSTRUCTION & RESTORATION SERVICES, 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 $\frac{05/04/2018}{1}$ and assigned Florida document number L18000113246 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: K.O. CONSTRUCTION & RESTORATION SERVICES, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 6999-02 MERRILL RD. SUITE 191 Enter new principal offices address, if applicable: JACKSONVILLE FL 32277 (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: ALLKHANSA Name of New Registered Agent: 6999-02 MERRILL RD. SUITE 191 New Registered Office Address: Enter Florida street address

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.

City

JACKSONVILLE

If Changing Registered Agent, Signature of New Registered Agent

, Florida <u>32277</u>

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

Title	<u>Name</u>	Address	Type of Action
MGR	ALI KHANSA	5681 EDENFIELD RD. APT 916	■ Add
		JACKSONVILLE FL 32277	□ Remove
			Change
MGR	CARLO Z KHANSA	5681 EDENFIELD RD. APT 916	
		JACKSONVILLE FL 32277	□ Remove
			Change
			□ Add
		\$	Remove O Change
			Add
		<u>, , , , , , , , , , , , , , , , , , , </u>	P. □ Remove
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L'Crastine e	date, if other than the	n data of filim	05/04/2018	3		(ontional)		
If an effective Note: If th	e date is listed, the date mune date inserted in this b s effective date on the I	ist be specific an lock does not	d cannot be prio meet the applic	able statutory	or more than 90 day	(optional) vs after filing.) ts, this date v	Pursuant vill not l	to 605.020 be listed a
	d specifies a delaye th day after the rec			ot an effectiv	ve time, at 12	:01 a.m. d	on the	earlier o
Dated	5/11		20/	8.				
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Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee