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## **COVER LETTER**

то:		stration Sec sion of Corp				
CUDIE		CRUVINO	IMPORTS LLC			
SUBJEC	C1: .	Name of Limited Liability Company				
The encl	losed	Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn	all correspo	ndence concerning this matter	to the following:		
			COURTNEY R KLINE			
				Name of Person		
				Firm/Company		
			327 S LAKESIDE DR.			
				Address		
			LAKE WORTH, FL 33460	0		
			COURTNEYROSEREALT	City/State and Zip Code OR@GMAIL.COM		
			E-mail address: (	to be used for future annual report noti	fication)	
For furth	ner in	formation co	oncerning this matter, please ca	all:		
COURT	NEY	R KLINE		785 221-0008		
·	-	Name of	Person	Arca Code Daytim	e Telephone Number	
Enclosed	d is a	check for the	e following amount:			
<b>■</b> \$25,6	00 Fi	ling 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/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CRUVINO IMPORTS LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on 06/27/2018	and assigned
Florida document number L18000157208		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
COURTNEY KLINE LLC		
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 ADDRES	<u> </u>	2019 7.3.1
		227 PM 11
		7.7
		- <u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		7 5 N
		J:-
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
Indicated Office (Indiae)	linter Florida street address	
	175 - 12 -	l.
***************************************	, Florid	18 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 = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	JOSHUA D BEHAM		□ Add
		6109 W 54TH TERRACE MISSION, KS 66202	■ Remove
			□ Change
MGR	MICHAEL A HATHAWAY		Add
	<b>-</b>	2426 LAZY BROOK LN. LAWRENCE, KS 66047	■ Remove
			☐ Change
			□ Remove
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Effective date, if other than the date is listed, the date must Note: If the date inserted in this blockdocument's effective date on the Department.	k does not meet the applic	able statutory filing requ	<b>(optional)</b> an 90 days after filing.) Pursua airements, this date will no	nt to 605,020 t be listed a
ne record specifies a delayed The 90th day after the reco	effective date, but no d is filed.	t an effective time,	at 12:01 a.m. on the	e earlier o
Dated AUGUST 27	. 2019	·		
	Courtney Kli	ne orized representative of a n	nember	
	5 3			
COURTNEY KLINE		ed name of signee		

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Filing Fee: \$25.00