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| PICK-UP WAIT MAIL                       |
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| (Document Number)                       |
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SECRETARY OF STATE

T FEWIERX

# **COVER LETTER**

| SUBJECT: KELLER           | KHLOE INVESTMENT GROU                        |   |   |
|---------------------------|--|---|---|
|                           | Name of Lin                                  | nited Liability Company   |   |
| The enclosed Articles of  | f Amendment and fee(s) are sub               | omitted for filing.   |   |
| Please return all corresp | ondence concerning this matter               | to the following:   |   |
|                           | Marcus Felix                                 |   |   |
|                           |  | Name of Person  | <del></del>   |
|                           | KELLER KHLOE INVES                           | TMENT GROUP, LLC  |   |
|                           |  | Firm/Company  |   |
|                           | 104 SE 2 Avenue                              |   |   |
|                           | •  | Address   |   |
|                           | Dania Beach, FL 33004                        |   |   |
|                           | kellerkhloeinvestment@gm                     | City/State and Zip Code   | <del></del>   |
|                           | E-mail address: (                            | to be used for future annual report notif                           | ication)  |
| For further information   | concerning this matter, please c             | all:  |   |
| Marcus Felix              |  | 954 549-9469<br>at ()   |   |
| Name                      | of Person                                    | Area Code Daytimo   | e Telephone Number  |
| Enclosed is a check for t | he following amount:                         |   |   |
|                           | _  | T \$55.00 Dillion Eag. R.   | □ <b>(</b> 40,00 PH, U.s.   |
| □ \$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

TO:

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

| (Name of the Limited Limited Limitity Compa   | any as it now appears on our re  | ecords )                           |  |  |
|---|--|------------------------------------|--|--|
| (A Florida Limited  | Liability Company)   | . <u></u> ,                        |  |  |
| The Articles of Organization for this Limited Liability Company Florida document number L18000168367  | were filed on 7/12/18  | and assigned                       |  |  |
| This amendment is submitted to amend the following:   | document number L18000168367  mending name, enter the new name of the limited liability company here:  mame must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" are principal offices address, if applicable:  Dania Beach, FL 33004  Dania Beach, FL 3300 |                                    |  |  |
| e Articles of Organization for this Limited Liability Company were filed on 7/12/18 and assigned brida document number L18000168367  is amendment is submitted to amend the following:  If amending name, enter the new name of the limited liability company here:  ter new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." ter new principal offices address, if applicable:  Index sequence Dania Beach, FL 33004  ter new mailing address, if applicable:  Index sequence Dania Beach, FL 33004  If amending the registered agent and/or registered office address on our records and the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address |  |                                    |  |  |
| The new name must be distinguishable and contain the words "Limited Liabi   | ility Company," the designation  | "LLC" or the abbreviation "L.L.C." |  |  |
| Enter new principal offices address, if applicable:   | w principal offices address, if applicable:  |                                    |  |  |
| (Principal office address MUST BE A STREET ADDRESS)   | Dania Beach, FL 33004  |                                    |  |  |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)   |  |                                    |  |  |
| 3. If amending the registered agent and/or registered o registered agent and/or the new registered office address her   |  | cords. Senter the name of the      |  |  |
| Name of New Registered Agent:   |  | - 출급 <b>(A</b> ) :                 |  |  |
| New Registered Office Address:  | Enter Florida street a   | ddress                             |  |  |
|   | 2  |                                    |  |  |
|   | City   |                                    |  |  |

#### 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> | <u>Name</u>    | Address              | Type of Action |
|--------------|----------------|----------------------|----------------|
| MGR          | Clent Emmanuel |                      | Add            |
|              |                | 7440 NW 36TH ST      | <b>U</b> Add   |
|              |                | LAUDERHILL, FL 33319 | ■ Remove       |
|              |                | <u> </u>             | Change         |
|              |                |                      | Add            |
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| Effective date, if other than the date of filing:  Tan effective date, if other than the date of filing:  Tan 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 605.020 Actes:  The date inserted in this block does not neet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filed.  The 90th day after the record is filed.  Signature of a frember or authorized representative of a member  Marcus Felix  Marcus Felix  Marcus Felix  Marcus Felix  Marcus Felix  Marcus Felix  Marcus Felix | -                             |  |           |
|--|-------------------------------|--|-----------|
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| Signature of a rhember or authorized representative of a member  | July 30                       | 2019   |           |
|  | Dated                         |  |           |
|  |                               | Morral Felix   |           |
| Marcus Felix   |                               | Signature of a member or authorized representative of a member   |           |
|  | Maren                         | Felix Macaus Julion Typed or printed name of signec  |           |

Page 3 of 3

Filing Fee: \$25.00