118000178365

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2019 JUN 20 AH ID: 50

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COVER LETTER

TO: Registration S Division of Co								
SUBJECT:	The Kenti Name of Lim	a Palm Company ited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.						
Please return all correspo	ondence concerning this matter	to the following:						
	BRADLEY & LAURA K Miller Name of Person							
	The ke	ntic Palm Company FundCompany	14					
	4 200	Eola Ave.						
		V. Ne FL. 32796 City/State and Zip Code						
	E-mail address: (brade bradmille to be used for future annual report not	C.COM (fication)					
For further information c	concerning this matter, please ca	all:						
	Miller of Person	at (<u>321)</u> <u>294</u> – Area Code Daytin	9477 ne Telephone Number					
Enclosed is a check for t	he following amount:							
\$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 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

The Kentia Pale (Name of the Limited Liability Compan (A Florida Limited Li	vas it now appears on our records.)					
The Articles of Organization for this Limited Liability Company v. Florida document numberL18000178365						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liabil	ity company here:					
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "L.L.C." or the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS)	Cazenovia, NY, 13035					
Enter new mailing address, if applicable:	4812 Ridge Rd.					
(Mailing address MAY BE A POST OFFICE BOX)	g address, if applicable: WAY BE A POST OFFICE BOX) the registered agent and/or registered office address on our records, enter the mame of the new					
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:						
New Registered Office Address:	Enter Florida street address					
	, Florida					
New Registered Agent's Signature, if changing Registered Agent:	Eug Egy Cour					

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 or removed	g Authorized Person(s) authorized to I from our records:	manage, enter the title, name, and address of ea	ch person being added
MGR = M			
<u>Title</u>	Name	Address	Type of Action
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		Titusville, FL. 32796	iy /Remove
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