## 118000195779

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>:</del> #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	_
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900317422419

Andrew - Grand Control

SECRETARY OF STATE

AUG 2 T SCHROED.

## **COVER LETTER**

Division of Corporations
SUBJECT: KJLK HOLDINGS L.L.C.
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kenneth Oravecz Name of Person
KJLK Holdings L.L.C.
Firm/Company
175 2Nd 5+, 5 PH/2 Address
5t. Petersburg, Floride 3370/ City/State and Zip Code
**City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kenneth Oravecz = 1614, 348-1016
Name of Person at (614) 348-10/6  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

0

company has been notified in writing of this change.

This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  KJLK Holdings LLC.  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC.  Enter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Conter 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 egistered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address  Florida  Zip Code	DEACH CRYFIO L.L.C.		and an arrange of			
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  KJLK Holdings L.L.C. The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC.  Enter new principal offices address, if applicable:  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 egistered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Lip Code	(Name of the Limited Liability Compa (A Florida Limited	Liability Company)	rs on our records.)			
A. If amending name, enter the new name of the limited liability company here:    K J L K   Hold   1495   L. L. C.	The Articles of Organization for this Limited Liability Company Florida document number <u>L 18000195779</u> .	were filed on <u>/</u>	lugust 15, 2018 and assigned			
The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC.  Center new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Center 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 egistered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address  Florida  Zip Code	This amendment is submitted to amend the following:					
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC.  Enter new principal offices address, if applicable:  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 registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address  Lip Code	A. If amending name, enter the new name of the limited liab	ility company h	<u>ere</u> :			
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC.  Enter new principal offices address, if applicable:  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 registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address  Lip Code	KJLK Holdings L.L.C.					
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 registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address  Lip Code	The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the d	lesignation "LLC" or the abbreviation "L.L.C."			
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 registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address  Lip Code	Enter new principal offices address, if applicable:		<u> </u>			
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 registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida	(Principal office address MUST BE A STREET ADDRESS)		AL AL			
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 registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  City  Zip Code			6 2 C			
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 registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  City  Zip Code			<u>νης</u> ω <b>,</b> Πο - <b>Π</b>			
Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our records, enter the name of registered agent and/or the new registered office address here:    Name of New Registered Agent:	Enter new mailing address, if applicable:		$\mathbb{R}_{0}$			
B. If amending the registered agent and/or registered office address on our records, enter the name of registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida  Zip Code			7:   1AT 0RI			
Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  City  Zip Code			8F 6			
Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  City  Zip Code			•			
New Registered Office Address:  Enter Florida street address	registered agent and/or the new registered office address her		our records, <u>enter the name of the</u>			
Enter Florida street address , Florida  City Zip Code	Name of New Registered Agent:					
, Florida	New Registered Office Address:					
· · · · · · · · · · · · · · · · · · ·		Enter Florida street address				
· · · · · · · · · · · · · · · · · · ·		, Florida				
		•	Zip Code			
iew Registered Agent's Signature, if changing Registered Agent:	New Registered Agent's Signature, if changing Registered Agent:	•				
hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply we	l hereby accept the appointment as registered agent and agr	ee to act in this	capacity. I further agree to comply with			

If Changing Registered Agent, Signature of New Registered Agent

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

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
			□ Remove
			Change
			Remove
			Change
		<u> </u>	Change  ALL AHAS SEE
			Remove
			Add—  E. F. DR. Add—  Remove  Change
<del></del>			- □ Add
			Remove
			□ Change
			Add
			□ Remove
			□ Change
			Add
			Remove
			□ Change

				. <u>.</u> _						_
						·		<u> </u>		_
	_ <del>.</del>						<u> </u>			_
		<u> </u>			<del>_</del> .					_
										_
		<u></u>				<del>-</del>				_
					<del></del>		_	3.4 3.4 3.4 3.4 3.4 3.4 3.4 3.4 3.4 3.4	18 A	_
		<del></del>					·	4 <u>4</u> 50	AUG 2	<u> </u>
								<u> </u>	3 A	ī
				• • • • • • • • • • • • • • • • • • • •				FLORID		
	<u> </u>		<del>-</del> -					<u></u>	. 0	<del>_</del>
								•		-
		<del></del>				<u></u>				_
			<u> </u>							<u></u>
<u>.                                    </u>				<del></del>						_
ote: If th	date, if other the date is listed, the cone date inserted in s effective date or	this block does	not mee	et the appli	cable statut					
	d specifies a de th day after th			te, but n	ot an effe	ctive time	e, at 12:01	La.m. on t	he earl	ier o
	Augus	+ 20 Min Co	·	2018	·					
ated		///		,						

Page 3 of 3

Filing Fee: \$25.00