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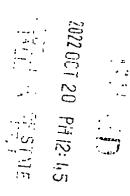
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A. BUTLE + JAN 17 2023

COVER LETTER

Tallahassee, FL 32314

TO: Registration So Division of Con					
K Boss Tea					
SUBJECT:		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:			
	Kay Ethridge				
		Name of Person			
		Firm/Company			
	1501 Belmont Lane				
		Address			
	North Lauderdale, Florida	33068			
	K5wishes2000@yahoo.com	City/State and Zip Cod	e	<u>_</u>	
	= '	to be used for future annu:	al report notifica	ition)	
For further information of	concerning this matter, please co	all:			
Kay Ethridge			39-6992		
Name o	of Person	at () Area Code	Daytime T	elephone Number	
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is e		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre		-	Address:		
Registration Section Division of Corporations			Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 OCT 20 PH 12: 1,5

___. Florida 33068 Zip Code

K Boss Tea 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 $\frac{08/23/2018}{2}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A 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) P. O. Box 590764 Enter new mailing address, if applicable: Ft. Lauderdale, Fl 33359 (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: Kay Ethridge Name of New Registered Agent: 1501 Belmont Lane 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

North Lauderdale

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Kay Ethridge	P O Box 590764	
		Ft. Lauderdale, Fl 33359	□Remove
			≡ Change
		□Add	
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Remove
			Change
			□Add
		□Remove	
			□Change
			□Add
			□Remove
			□ Change

υ, ,	information, enter change(s) here: (Attach additional sheets, if necessary.)
	<u> </u>
Note: If the date inserted	than the date of filing:
he record specifies a delay ord is filed.	ed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated October 10	2022
	Signature of a member or authorized representative of a member
Kay Ethridge	
	Typed or printed name of signee