11/10/23, 9:64 AM

Division of Corporations

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(((H23000390360 3)))



H230003903603ABC-

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THE KLEIN GROUP Account Number : I20190000115 Phone : (561)419-9995 Fax Number : (954)340-9005

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COUNTYLINE KM LLC

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ARTICLES OF AMENDMENT TO H230003903(ARTICLES OF ORGANIZATION OF

COUNTYLINE KM LLC	
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 01-22-2019 and assigned
Florida document number L19000023537	
This amendment is submitted to amend the following:	F-3
A. If amending name, enter the new name of the limited liab	•
The new name must be distinguishable and contain the words "Limited Liabl	lity Company," the designation "LLC" or the abbreviation "L.L.C."
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)	NA N
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new regi</u>
Name of New Registered Agent:	N) A
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code

New Registered Agent's Signature, il 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.

H230003903603

HA30003103603

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	JUAN MAROSO	825 BRICKELL BAY DRIVE STE 1846	
		MIAMI, FL 33131	□ Remove
			□ Change
			□Add
			□ Remove
			☐ Change
			🗆 Add
			©Remove
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Tective date, if other than the date in affective date is listed, the date must be so	e of filing:	o date of filing or more th	(optional) an 90 days after filing.) Pur	crusat to 605.02
ote: If the date inserted in this block ocument's effective date on the Depart	iocs not meet the applica:	DIE SISTUTOFY MIND FEG	uirements, this date will	not be listed
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ecord specifies a delayed effective date is filed.	e, but not an effective tim	ne, at 12:01 a.m. on the	carlier of: (b) The 90	th day after th
is theat.				
11-8 ted	2023			
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Filing Fee: \$25.00