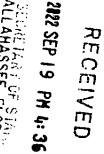
(Requestor's Name)	
(Address)	600394126
(Address)	- <u>-</u>
(City/State/Zip/Phone #) PICK-UP WAIT MAIL	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(Business Entity Name) (Document Number)	09/20/2201001-
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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COVER LETTER

TO: Registration So Division of Cor			
SUBJECT: KA	IC AUTO SAL	ES LLC	
	Name of Limit	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ondence concerning this matter t	o the following:	
	TEQUILLA V	ERNER Name of Person	
		Nume of Ferson	
	KMC AUTO	SALFS LLC Firm/Company	<u></u>
	10934 LEM	TURNER RD	
		, tudi ess	218
	FUTURISTICSO E-mail address: (1	City/State and Zip Code LUTKWS (2) TAHOO. (6) obe used for future annual report notified.	COM fication)
For further information of	concerning this matter, please ca		
KECNAN	VERNER	at (904) 536 - Area Code Daytime	5386
Name (11 ret5011	Area Code Daytimi	e rerephone 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)	☐ S60.00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

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	Or		14 64
(Name of the Limited (A	Liability Company as it now apper Florida Limited Liability Company	2022 SEP 16 pars on our records.) 1211.	OF STATE
The Articles of Organization for this Limited Liab	lity Company were filed on _	3/25/04/03	and assigned
Florida document number L 1900008/12	9		
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of th	e limited liability company	<u>here</u> :	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the	designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET)	(IDDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered affice address b	<u>iere</u> :		
Name of New Registered Agent:	KEENAN VER. 10934 LEM TO Enter F JACKSON VILLE	NER	
New Registered Office Address:	10934 LTM 1. Enter F	URNER ID	
	JACKSON VILLE	, Florida	32218 Zip Code

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>	Name	Address	Type of Action
MGR	KEENAN VERNER	JACKSONVILLE, FL 32.	Add
		JACKSONVILLE, FL 32.	218 Remove
	, /		□Change
AMBR	TEQUILLA YERNER	12021 CHESTER CREEK RD	
		JACKSONVIllE, FL 3221	Remove
			Change
			□Add
			□Remove
			□Change
			🗆 Add
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ne:	ive date, if other than the date of filing: 9/19/2022 (optional) Tective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a tent's effective date on the Department of State's records.
is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
ted	SEPTEMBER 19 2022
	, , ,
	Signature of a member or authorized representative of a member REENAN VERNER Typed or printed name of signee

Filing Fee: \$25.00