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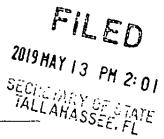
	Registration Section Division of Corporations
SUBJEC	T: KCKK S ICHOISTEKT HITTON LLC Name of Limited Liability Company
The encl	osed Articles of Amendment and fee(s) are submitted for filing.
Please re	Address Add
	Name of Person
	369 WEST WINDWARD WAY
	Address
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
$\mathcal{L}_{t_{i}}$	Name of Person $\frac{(5b)}{\text{Area Code}} = \frac{(5b)}{\text{Area Code}} = \frac{(5b)}{\text{Daytime Telephone Number}}$
. 7	It is a check for the following amount: 00 Filing Fee

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Kex 18 18	ONE PORTATION LLC	TALLAHASSEE
(Name of the Limited L. (A F	GNS PUK 1 ft 1 (1) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
The Articles of Organization for this Limited Liabil Florida document number $\angle i$ \widehat{q} $\widehat{D}\widehat{O}$ \widehat{O} \widehat{O} \widehat{O}	ity Company were filed on 147311- 31	7 304 Jand assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the		the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	DDRESS)	
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 agent and/or the new registered office		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
_	, Flori	daZip Code
	City	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:

	Manager Authorized Member		
Title	Name	Address	Type of Action
Marc	HOPE KERR	14130 WAY MICHEN ST. Linke Wording FL 2346	Add
		Luxe Worker Th 2346	<u> </u>
			Change
			🗆 Add
			☐ Remove
			□ Remove
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		11.000	D Add
			Remove
			Change
			□ Add
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Effective date, if other than the date of filing:		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed. Outed Signature of a member or authorized representative of a member		
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