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R. WHITE FEB 12 2020

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	KnowHow Vo	acation's LLC ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Kayı	eigh Olafsen	l
	Knaw	HOW VOICATIONS Firm/Company	LLC
	162	Dakota Ave Address	
	Gro	veland, FL 347: City/State and Zip Code	36
	Booking E-mail address: (1	S OKNOWHOW VOCO	tions.com
For further information co	ncerning this matter, please ca	all:	
Kayleigh Jame of	<u>Olafsen</u> Person	at (362) 449 - Area Code Daytime	- 8983 Telephone Number
Enclosed is a check for the	e 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 So Division of Co	ection	Street Address: Registration Sec Division of Corp	
DIVISION OF CO	APOLULIONS	יוס ווסופויזוס	(ATMITOTIN

P.O. Box 6327

Tallahassee, FL 32314

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 OF

<u> </u>	How Va		<u> ١٠٠٢ - ١٠ ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا </u>	կկ
(Name of the Limite	(A Florida Limited L	iability Company)	our records.)	
The Articles of Organization for this Limited Li Florida document number <u>L19000125</u>		were filed on <u>05</u>	109/2011	and assigned
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liabi	address on our records, enter the name of the new registered Pigh M. Olafseo Dakota Ave Enter Florida street address		
The new name must be distinguishable and contain the w	ords "Limited Liabili	ty Company," the design	nation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if application	able:			
(Principal office address MUST BE A STREE	T ADDRESS)			
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE</u>)	<u>BOX)</u>			
B. If amending the registered agent and/or reagent and/or the new registered office address		ddress on our recor	ds, <u>enter the nar</u>	ne of the new registered
Name of New Registered Agent:	Kayle	igh M. C	llafsen	
New Registered Office Address:	162 D		Je treet address	
	Grove		, Florida	34736 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.

f 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	Karen N. Wycoff	2417 Oak Hollow Dr.	□Add
		KISSIMMEE, FL 34744	XRemove
			□Change
			□Add
		 	□Remove
			□Change
			□Add
			□Remove
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			□ Change

Page 2 of 3

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an effective date is I ote: If the date in	other than the disted, the date must be serted in this block we date on the Department.	e specific and k does not m	cannot be prior seet the applic	to date of f able statut	iling or more th	ıan 90 days	after filing) g.) Pursuant to 605.020 e will not be listed as
	ies a delayed e after the recor		ate, but no	ot an effe	ective time	, at 12:	01 a.m.	on the earlier o
ated Oll	T Parena	<u>, </u>	2020	<u>Q</u> .				
	Kayl	Lech gnature of a r	M Onember or auth	of Jorged repre	esentative of a	member		
	Kayl	•		. ^				