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COVER LETTER

	Registration Section Division of Corpora			
SUBJEC	·	Kulu	LLC	
500,120		Name of Limit	ted Liability Company	
The enclo	osed Articles of Ame	endment and fee(s) are subn	nitted for filing.	
Please re	turn all corresponder	nce concerning this matter to	o the following:	
		Allus	on Wagoner	
	_		Name of Person Y/Y LLC	
	_	249	1 Arm/Company Ath Avenue 5.	
	_	Tada	nile Beach FL	32160
	_	allysonm	City/State and Zip Code LCCC Egmail	ion
East Coats	: <i>6</i>	Estinail address: (to		anon)
A	///san M	rning this matter, please cal / 100 NeX	at (60) {36 -	5688
	Name of Pers			Telephone Number
Enclosed	is a check for the fol	llowing amount:		
\$25.0	0 Filing Fee □	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 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/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

- Kyly LLC)
(Name of the Limited Liability Compan (A/Florida Limited Li	<u>y as it now appears on our records.</u>) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number 190017302.	were filed on $\frac{07/03/19}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	249 70th Avenues.
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville Beach, Fl 32250
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	23
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here:	
registered agent and/or the new registered office address nere:	
	ë ö
Name of New Registered Agent:	. 8
New Registered Office Address:	
	Entre: Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office and agent as the company has been paided in maritime of the change.	performance of my duties, and I am familiar with and covided for in Chapter 605, F.S. Or, if this document is
company has been notified in writing of this change.	

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See not page >

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 = MS $AMBR = AS$	anager uthorized Member		
<u>Title</u> AMBR	Name Ryan Wagoner	Address Jacksonville Black, FL 3205	Type of Action Add Remove
			Change
			
			Remove
			Change
			□ Remove
			Change
 -			□ Add
			□ Remove
			Change
			Add
			Remove
			Change
			□ Remove
			Change

. 11 4111	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Effecti	ve date, if other than the date of filing:
Note:	ective 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 605.0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
the rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	September 18 2019
A	Signature of a member or authorized representative of a member
	PLACE OF A HOLDON ALL

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Filing Fee: \$25.00