L19000 226275

Office Use Only



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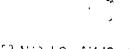
Division of Cor					
King Mana	gement Team, LLC	•			
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Philip L. Logas, Esq.				
		Name of Person			
	Philip L. Logas, P.A.				
		Firm/Company			
	1525 International Parkwa	y. Suite 4021			
		Address			
	Lake Mary, Florida 32746				
		City/State and Zip Code			
	plogas@logaslaw.com	to be used for future annual report noti	diention)		
For further information co	oncerning this matter, please co	·			
Philip L. Logas		407 849-1555			
Name of Person		at () Area Code Daytim	e Telephone Number		
Enclosed is a check for the	ne following amount:				
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee.		
-	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Addres		<u>Street</u> Address:			
Registration Section		Registration Section			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



2020 ATT 18 ATTO: 19

King Management Team, LLC		73 (4110)
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our reco Liability Company)	rds.)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L19000226275}{L19000226275}$.	were filed on September 6, 20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LL	C" 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)		
indiang dualess MAT BEATOST OFFICE BOA		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	255
	F.	lorida
	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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jennifer King	616 West Yale Street	≣Add
		Orlando, Florida 32804	□Remove
			□ Change
MGR	Barbara Burks	1921 Maguire Rd. Suite 104	■ Add
		Windermere, FL 34786	□Remove
AR	Jennifer King	616 West Yale Street	
		Orlando, Florida 32804	≣Remove
			Change
			□Add
			□Remove
			□Change
			DAdd
			□Remove
			□Change
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			□Remove

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fective date, if other than the n effective date is listed, the date mu ote: If the date inserted in this bl cument's effective date on the D	ock does not i	meet the appli	or to date of filing	g or more than filing requi	(option 90 days after f rements, this	nal) ling.) Pursuant date will not	to 605.020 be listed as
ecord specifies a delayed effectivis filed.	e date, but no	t an effective	time, at 12:01	a.m. on the	earlier of: (b)	The 90th da	y after the
August 14		. 2020					
		261					
	Signature of a	member or sud	horized represen	dating of a me	mhor	<u> </u>	<u>-</u>

Filing Fee: \$25.00