19000238/59

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COVER LETTER

ΓΟ: Registration Section Division of Corporations			
SUBJECT: KLUB V	IBEZ LL	<u></u>	
	Name of Limited L	iability Company	
The enclosed Articles of Amendment	and fee(s) are submitted	I for tiling.	
Please return all correspondence conc	erning this matter to the	following:	
	Charles	RMCM. Mon Jr	·
	829 1	Bethel St.	·
	Chat	Ja hoochee, FL y/State and Zip Code	<u>32324</u>
	Corporations		
For further information concerning the	is matter, please call:		
Charles R. M.M., Name of Person	104 Jr.	at (<u>\$50</u>) <u>545</u> Area Code Daytime	- 6863 Telephone Number
Enclosed is a check for the following	amount:		
	<u> </u>		

TO:

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

KLUB VIBEL L	y Company as it now appe	irs on our records.)		_	
(Name of the Limited Liabilit (A Florida	Limited Liability Company)	,			
The Articles of Organization for this Limited Liability Co	ompany were filed on _	10/0/19	and	assigt	ned .
Florida document number <u>L 19000 238 159</u>	·	, .			
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)					
A. If amending name, enter the new name of the limi	ted liability company l	<u>iere</u> :			
The case name must be distinguishable and contain the words "I imi	ited Linkility Company " the	designation "11 ("" or	the abbreviation	."1 1 (
The new frame thist be distinguishable and contain the words. Faint	act Babiniy Company, the	designation 1500 of	ine appreviation	11.11.	
Enter new principal offices address, if applicable:	-1 -		·	<u> </u>	
(Principal office address MUST BE A STREET ADDR	<u> </u>		···	3	
				₹	
			•	œ	43
Enter new mailing address, if applicable:	address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				=	14 <u></u>
<u> </u>				2	
C. C. C.		on our records, <u>e</u>	nter the nai	ne of	the nev
registered agent and/or the new registered office addi	ress here:				
Name of New Registered Agent:					
New Registered Office Address:	Enter Fl	orida street address			
		L 21	1		
	City	, Florid	1 a Zip C	ode	
Name Danietarnel Agant's Signature, if shanging Dagietara	d Canata		•		

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 Address Type of Action Name Title Danien Chapman 600 Hardaway Road DANN AMBR Chattahoocher, FL 32324 DKemove Change Charlesh.M.M. Millonder 829 Berkel Street and MGR Chaffa hoocher, FL 33334 Remove ☐ Change ☐ Remove ☐ Change □ Add ☐ Remove _____ Change □ Add ☐ Remove □ Change □ Add ☐ Remove

_□ Change

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<u>Note:</u> 1	we date, if other than the date of filing: 10/2/249 (optional) crive 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 605.02 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed int's effective date on the Department of State's records.	207 as
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.	of
Dated _	Werenbor 8 2019.	
Dated _	Wevenbor 8 . 2019.	
Dated _	Wovember 8 2019 Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00