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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
SUBJECT: <u>kr</u>	nowby lity U	ted Liability Company	
	Amendment and fee(s) are sub-	•	
r lease return an correspo	ndence concerning this matter	to the following.	
	Steven	FoSter Name of Person	<del></del>
	Knowby.	Fran Company	
	1518 N. r	nont chapel	Ln.
	_ Mid wa	Mont chapel  Address  M. UT SLIDIC  City/State and Zip Code  Chapelity  City/State and Zip Code	1
	5. Foster	a be used for future annual report not	iteation)
For further information ed	oncerning this matter, please ca	df:	
Steven Name of	Foster	at (9V4) 590 Area Code Daytin	1 - 279 y ne Telephone Number
Enclosed is a check for th	e following amount:		
□ \$25.00 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 S Division of C P.O. Box 632	section orporations	Street Address: Registration Se Division of Co The Centre of T	rporations

RECEIVED APR 1 3 2020

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

<u>knowby lity</u>	LC	an our records \	
(A Florida Limited I	Liability Company)	in our records.)	
The Articles of Organization for this Limited Liability Company Florida document number L200001045Le.	were filed on <u>01</u>	03/2020	and assigned
This amendment is submitted to amend the following:	pend the following:  I contain the words "Limited Liability company here:  I contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC."  Ses, if applicable:  E A STREET ADDRESS)  A D D D D D D D D D D D D D D D D D D		
A. If amending name, enter the new name of the limited liab	tion for this Limited Liability Company were filed on O1 03 2020 and assigned or 200000 D05 p.  iitted to amend the following:  enter the new name of the limited liability company here:  guishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC."  ices address, if applicable:  is MUST BE A STREET ADDRESS)  ress, if applicable:  BE A POST OFFICE BOX)  isstered agent and/or registered office address on our records, enter the name of the fiew registered egistered office address here:  Registered Agent:		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the desi	gnation "LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
			202
Enter new mailing address, if applicable:			APR I
(Mailing address MAY BE A POST OFFICE BOX)			:ne .
B. If amending the registered agent and/or registered office: agent and/or the new registered office address here:	address on our reco	ords, <u>enter the name</u>	of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Finter Florida	o street address	
	72	_	
<del></del>	City	, Florida	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
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		Ste 200 Kissimmee, Fl	<u>-</u> ₹Remove
		34747	□ Change
			DAdd
			□Remove
		<del></del>	□ Change
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			2020 REMPR
		7. T. C.	□ Change F
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lf an effecti <u>Note:</u> If t	date, if other than ve date is listed, the dat the date inserted in the 's effective date on t	te must be specific an his block does not	nd cannot be meet the a	ipplicable s	of filing or n	nore than 90		ing.) Pursuant		
	pecifies a delayed eff	fective date, but no	ot an effect	tive time, a	. 12:01 a.m.	on the earl	ier of: (b)	The 90th da	y after t	the
rd is filed.		3rd	20	20						
rd is filed.	April	3rd	20	20	representative	e of a membe	· ·			

Filing Fee: \$25.00