

12/10/2020

L20000048996

Florida Department of State
Division of Corporations
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KPL ATTRIBUTION LLC**

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12/11/20

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: KPL ATTRIBUTION LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeffrey C. Weinstein, Esq.

Name of Person

Mittenthal Weinstein LLP

Firm/Company

3100 S Federal Highway, Suite B

Address

Delray Beach, FL 33483

City/State and Zip Code

weinstein@mw-attorneys.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeffrey C Weinstein

561

703-1908

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
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☐ \$60.00 Filing Fee,
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Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

TALLAHASSEE, FLORIDA

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KPL ATTRIBUTION LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on L20000048996 and assigned
Florida document number 02/11/2020.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

S&P7 ATTRIBUTION LLC

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Eric Korchia	33 SE 4th Street, Suite 100	<input type="checkbox"/> Add
		Boca Raton, FL 33432	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Sparing Partners 2 Inc	33 SE 4th Street, Suite 100	<input type="checkbox"/> Add
		Boca Raton, FL 33432	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Private Equity Realty	33 SE 4th Street, Suite 100	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33432	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Private Equity Realty	33 SE 4th Street, Suite 100	<input checked="" type="checkbox"/> Add
		Boca Raton, FL 33432	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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