## L20000 81349

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City.	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



500342754095

04/08/20--01014--015 \*\*25.00

2020 APR -6 AM 11: 35

JY91 H117120

## COVER LETTER

Division of Cor			
SURJECT: KÇÊF	Investment pr	operties LLC	
		ited Liability Company	<del></del> .
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
Please return all correspo	ondence concerning this matter	to the following:	
	<u>Nalter</u>	FISH Name of Person	
	KCI+ Investi	Ment Propertie	S_LLC_
		~	
	55449 Yell	OW Jacket Dr.	
	Callahan, EL	30011 City State and Zip Code	
		D Com Cast. Not	
For further information c	oncerning this matter, picase co	ill:	
Walter Fig.	a'Person	at (904 - , 910 - 91 Area Code Daytin	303 ne Felephone Number
Enclosed is a check for t	he following amount:		
≦\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate or Status	[1 \$55.00 Filling hee & Certified Copy (Controlla copy (Condesca))	Certificate of Status & 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YCF INVESTMENT (Name of the Limited Liab (A Flor	T Properties LLC  pility Company as it now appears on our record and Lamited Cability Company)	ds.)
The Articles of Organization for this Limited Liability Florida document number <u>L2 0000 81349</u>	Company were filed on March 13	2020 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	<b>8</b>
The new name most be distinguishable and contain the words "I	imited Liability Company," the designation "LLC	or the abbreviation #LC=#
Enter new principal offices address, if applicable:		R 07.7
(Principal office address MUST BE A STREET AD)	DRESS)	A
Enter new mailing address, if applicable:		35 · . 
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here		the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	SS
	, FI	lorida
	Circ	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>	Name	Address	Type of Action
VGR_	Kelsey O'steen	55002 Cub Ct	□Adđ
	· ·	Carrahan, Fl 32011	□Remove
			Denange
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
	<del></del>		□Add
			□Remove
			□Change
- <del></del>			
			□Remove
			Change

					<del></del>
		<del></del>			
		······			
					<del></del>
				····	
<del></del>					
<del>- 112 · · · · · · · · · · · · · · · · · ·</del>					···
<del></del>					
		·			<del></del>
<del></del>					
ffactiva data	if other than the date of	f filian		(antional	
an effective date fote: If the da	is listed, the date must be spece e inserted in this block doe, etive date on the Departme	itic and cannot be pric s not meet the appli	ar to date of filing or me scable statutory filing	re than 90 days after filing	;.) Pursuant to 605.0207 (.
record specific Lis filed.	s a delayed effective date, b	out not an effective	time, at 12:01 a m. o	n the earlier of: (b) T	he 90th day after the
ated	4-3-	2020	·		
	3/14	21			
	Nalle	to of a month or or and	horizad rayevenntators	d'a member	<del></del>

Filing Fee: \$25.00