## L20000118565

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## **COVER LETTER**

TO: Registration So Division of Cor		ţ	
TED KAY			
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jonathan J. Damonte		
		Name of Person	
	Jonathan James Damonte,	Chartered	
		Firm/Company	
	12110 Seminole Blvd.		
		Address	
	Largo, FL 33778		
		City/State and Zip Code	
	jjd@damontelaw.com E-mail address: (	to be used for future annual report notification)	
For further information c	oncerning this matter, please e		
Jonathan Damonte		727 586-2889 at ()	
Name o	f Person	Area Code Daytime Teleph	one Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Fifing 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 Addres Registration S	Section	Street Address: Registration Section	
Division of C	orporations	Division of Corporation	ons

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

7029 KINT 1 1 AN 6: 12

TED KAY 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 Florida document number L20000118565	were filed on May 1, 2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity 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:		<del></del>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flo	rida Zip Code
	Cuì.	zip Coae

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
MGR	Ted L. Kay	5549 Island Way, Seminole, FL 33772	□Add
			□Remove
			≣Change
			□Add
			□Remove
			Change
			□Add
		<u>-</u>	□Remove
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			☐ Change

fective date, if other than the date of filing:  In effective 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 to:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a reunant's effective date on the Department of State's records.		2020 Hill 11 201 20 12
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Jonathan James Damonte  Typed or printed name of signee	Jonathan James Dan	