

L20000161577

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

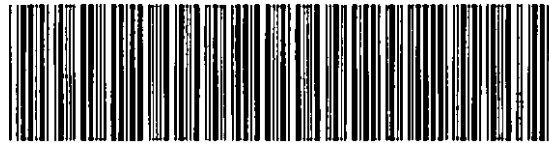
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FILED
2022 AUG 22 PM 2:46
U.S. DISTRICT COURT
DISTRICT OF COLUMBIA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kbmore Designs 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:

Brandy Morehead
Name of Person

Firm/Company

5614 Chirping Way W
Address

Jacksonville FL 32222
City/State and Zip Code

kbmoredesigns@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brandy Morehead at 904, 305-8333
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 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**

FILED

KBmore Designs LLC

2022 AUG 22 PM 2:46

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

RECEIVED

The Articles of Organization for this Limited Liability Company were filed on 06-11-2020 and assigned
Florida document number L20000161577.

This amendment is submitted to amend the following:

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

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)

6371 Collins Rd #1009
Jacksonville FL 32244

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6371 Collins Rd #1009
JACKSONVILLE FL 32244

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:

Kia Ellis

New Registered Office Address:

6371 Collins Rd #1009

Enter Florida street address

Jacksonville

City

Florida

32244

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.

Kia Ellis

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

[illegible]

(If an 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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated August 18 2022

Bruce Morehead

Signature of a member or authorized representative of a member

Brandy Morehead

Typed or printed name of signee