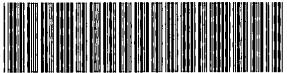
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: KFLETCH LL 20000330465 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:
Name of Person
K+le+ch LLC Firm/Company
3000 MW 130 Terrare Abt. 327
City/State and Zip Code
E-mail address: (to be used for future annual report hotification)
For further information concerning this matter, please call: Section 1997 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status □ Certified Copy
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

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

K+LEICH, LL	
(Name of the Limited Liability Compa (A Florida Limited I	ny <u>as it now appears on our records.</u>) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1-2000 220465	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
NA	
The new name must be distinguishable and contain the words "Limited Liabil	ity 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)	New address 3000 HW 130th Terror AX 327 Survise, Fr 333
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same as about a below
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: Registered Office Address:	address on our records, enter the name of the new regis

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 w provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with ar accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this documer 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 **Type of Action Address Title** Name pres J. Freder 5039 Water Edylly □ Change _____ □Change __ _ Remove __ _ Change bbA□ □ Remove Change ____ Change _____ □ Add _ _ _ _ _ Chang

. If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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5	Egistered Address Courage to 8
$ \swarrow $	Syle 5 Fretcher
<u>></u>	Syle S. Fretcher 200 NW 130th Terrale Apt 327
	Sarrise, Ft 33323
$\overline{\underline{Q}}$	enore Title: monager
\subseteq	knove Title: monager mistapher J. Frether
-	
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(If an effective Note: If	e date, if other than the date of filing:
he record : ord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after d.
Dated _	10/13/ 2020
	Signature of a member or authorized representative of a member
	KYLE FLETCHER Typed or printed name of signee
	. Typed of printed frame of signed