

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L20000262265

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC
Account Number : I20070000020
Phone : (813)435-3176
Fax Number : (813)333-6358

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: NS@NickSpradlin.Com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
KIREKULL WORKSITE, LLC**

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2022 APR 15 PM 11:35

2022 APR 15 PM 3:34

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APR 18 2022

K. Brumbley

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

KIREKULL WORKSITE, 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 08/24/2020 and assigned
Florida document number L20000262265.

This amendment is submitted to amend the following:

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

ROYAL CROWN RENTALS, 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:

2161 County Road 540A, #108

(Principal office address MUST BE A STREET ADDRESS)

LAKELAND, FL 33813

Enter new mailing address, if applicable:

2161 County Road 540A, #108

(Mailing address MAY BE A POST OFFICE BOX)

LAKELAND, FL 33813

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

_____, Florida
City

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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>
AMBR	Lakisha T. Bah	2161 County Road 540A, #108	<input checked="" type="checkbox"/> Add
		LAKELAND, FL 33813	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	NICKOLAS SPRADLIN	18801 N. DALE MABRY HWYSTE 119	<input type="checkbox"/> Add
		LUTZ, FL 33548	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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(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.

 Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00