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COVER LETTER

Tallahassee, FL 32314

TO:	Registration Division of C		♂	AF.		
SUBJI	ect. Ke	nso's Joy, LLC				
5005		Name of Lin	nited Liability Company			
The en	closed Articles	of Amendment and fee(s) are sul	omitted for filing.			
Please	return all corres	pondence concerning this matter	to the following:			
			Angel Tellus			
			Name of Person			
			Firm/Company	· · · · · · · · · · · · · · · · · · ·		
			9091 Spruce Creek Circle Address			
	Riverview, Florida 33578					
			City/State and Zip Code			
			kensosjoy@gmail.com			
For fur	ther information	E-mail address: n concerning this matter, please of	(to be used for future annual report noticeall:	fication)		
		Angel Tellus	at (<u>843</u>) <u>941-3804</u>			
	Name	e of Person	Area Code Daytim	e Telephone Number		
Enclos	ed is a check for	the following amount:				
□ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Addi		Street Address:			
	Registration Division of	1 Section Corporations	Registration Sec Division of Cor			
	P.O. Box 6.		The Centre of T	·		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kenso's Joy, LLC 4. An. 7:05

(Name of the Limited Liability Company as it now appears on our records.) . . . (A Florida Limited Liability Company) September 21, 2020 The Articles of Organization for this Limited Liability Company were filed on ____ and assigned Florida document number _ L20000295684 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Tellus Goods LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." One Urban Center Enter new principal offices address, if applicable: 4830 West Kennedy Blyd Suite 600 (Principal office address MUST BE A STREET ADDRESS) Tampa, Florida 33609 9091 Spruce Creek Circle Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Riverview, Florida, 33578 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 City 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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			Remove
			☐ Change
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			Remove
			Change
			□Add
			□Remove
			□Change

f amend	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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lfan effecti <u>Note:</u> If t	late, if other than the date of filing:
e record sp rd is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	01 June 2023
	and Tel
	Signature of a member or authorized representative of a member
	Angel Tellus
	Typed or printed name of signee

Filing Fee: \$25.00