LZO 000316605

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COVER LETTER

TO:	Registration Section
	Division of Corporations

-

	KIDARAH LLC	-	ı	•
SUBJECT:		Name of Limited Liat	vility Company	·

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Sarah Joseph		
	Soultri Music		
		Firm/Company	
	9187 Redonda Dr.		
		Address	
	Boca Raton, FL 33496		
		City/State and Zip Code	
	Me@kidarah.com	o be used for future annual report not	fication)
For further information co	ncerning this matter, please ca		
Sarah Joseph		323 9998977	
Name of	Person	Area Code Daytin	e Telephone Number
Enclosed is a check for th	c 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)

<u>Mailing Address:</u> 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

KIDARAH 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 <u>10/6/2020</u> and assigned Florida document number **L20000316605**

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 "LLC."

Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9187 Redonda Dr. Boca Raton, FL 33496

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9187 Redonda Dr. Boca Raton, FL 33496	<u> </u>
	<u> </u>

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:

	City	Zip Code
		Florida
Hest Registered Office Audress.	Enter Florida street add	Invss
New Registered Office Address:		
Name of New Registered Agent:		

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 amcading 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	James Fitzgerald Smith II		🗆 Add
		579 Northridge Rd. Apt. H Sandy Springs, GA 30350)
			_ Change
AMBR	Sarah Joseph	······	🗆 Add
			🗆 Remove
		9187 Redonda Dr. Boca Raton, FL 33496	Change
			Add
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			🗆 Add
			_ 🗆 Remove
		<u> </u>	🗍 Change
			□ Add
			_ Remove
			□Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Effective date, if other than the c (If an effective date is listed, the date must <u>Note:</u> If the date inserted in this blo document's effective date on the Dep	be specific and cannot be ck does not meet the a	pplicable statutory	or more than 90 days at	tional) ter filing.) Pursuant t this date will not b	o 605.0207 (3)(b) e listed as the
the record specifies a delayed effective ord is filed.		,	a.m. on the earlier of:	(b) The 90th day	after the
Dated January 7	2021		1-		

e-sig Signature of a member or authorized representative of a member

Vil

Sarah Joseph Typed or printed name of signee