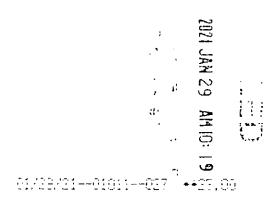
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COVER LETTER

TO: Registration Se Division of Cor			
4	LOCALE LIC	,	• •
SUBJECT:	KOSEU6 LLC Name of Lin	nited Liability Company	· · · · · · · · · · · · · · · · · · ·
	, and 5, 13	men shortly company	•
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	DAHOMEN	MARKET	
	Jir Oiley	MA-LTINEE Name of Person	**************************************
	KOSELIC	Firm/Company	
		Firm/Company	
	723 S 215	T AVE SUITE O	9
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	HOLLYWOOD	FLOCITA 33020 City/State and Zip Code	<u>.</u>
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	MIFTIAS & ME	TACCOUNTING. CO	OM7
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For further information c	oncerning this matter, please c	all:	
DAHOMEY NAT	2.TIN EZ	954 505-	3219
Name o	f Person	at (<u>954</u>) <u>505 -</u> Area Code Daytim	ne Telephone Number
Evaluated in a about the th	as fallancina amanat		
Enclosed is a check for th	-		
☎ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status &
	Comment of Man	(additional copy is enclosed)	Certified Copy
			(additional copy is enclosed)
•• ••		Ø	
<u>Mailing Addres</u> Registration S		<u>Street Address:</u> Registration Se	ction
Division of C		Division of Cor	
P.O. Box 6327		The Centre of T	•
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KOSFUG LCC	2021 JAN 29 AR 10. 19 Company as it now appears on our records 10. 19 Elimited Liability Company)
(Name of the Limited Liabilit	N Company as it now appears on our records.) 10: 19
(A Florida	Limited Liability Company)
he Articles of Organization for this Limited Liability Co	ompany were filed on $\frac{10/\frac{\pi}{2}/2020}{2000}$ and assigned
lorida document number L20000316647	
orida document number	_ ·
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limi	ted liability company here:
KOSELIG LLC	
he new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDR	<u>E33)</u>
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BON)	
. If amending the registered agent and/or registered	l office address on our records, enter the name of the new register
gent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	, Florida

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		Son		
<u>Title</u>	Name	2021 JAH 29 AH 10: 19	Type of Action	
			□Change	
			□Add	
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Typed or printed name of signee