<u>L20000321427</u>

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Sec Division of Corp		•	
SUBJECT:Ck	Inspired	(Co	
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	Christine	Name of Person	
	CK INSP	Firm/Company	
	60 800	Bohn Chrest	#-4813
	Miani.	City/State and Zip Code	30
	E-mail address: (to be used for future annual report no	amail, com
For further information co	oncerning this matter, please c		
Christine Name of	Person	at (305) 87 Area Code Daytii	me Telephone Number
Enclosed is a check for the	e following amount:		MAR 2
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is Enclosed)
Mailing Address Registration S Division of Co	ection orporations	Street Address: Registration S Division of Co	orporations

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION • OF

(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our records.) 1 Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on 10/12/ 2020 and assigned	[
Florida document number <u>C 2000 32 14 27</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here: V/A	
The new name must be distinguishable and contain the words "Limited Liab	bility 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)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, enter the name of the new regi	stere
Name of New Registered Agent:		<u>9</u>
New Registered Office Address:		
	Enter Florida street address	
	City , Florida Code	—
New Registered Agent's Signature, if changing Registered Agen	<u></u> D	

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 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
MGR	STEVEN TATE	60 SW 13th 6treet	□ Add
		世 4813	Remove
		Miani, FL 33130	□Change
AMBR	CHRISTINE KELLE	R 60 SW 13th Street	Add
		44813	□Remove
		miani, FL 3317	30 □Change
			□Add
			□Remove
			□Add
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fortiv	date, if other than the date of filing: (op	49 15		
an effec	ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days aft	tional) er tiling.) P	Ursuant to 6	05.020
<u>ote:</u> If	the date inserted in this block does not meet the applicable statutory filing requirements, the classical state on the Department of State's records.	his date wi	ll togt pe li	sted as
	s offeetive date on the Department of State 3 records.	:•	_	
.co.co.ed				
is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ((b) The S	Oth day af	ter the
ated _	9 march 2021			
	Signature of a member or authorized representative of a member			

Filing Fee: \$25.00