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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

TO:	Registration Se Division of Cor	ction perations	1	r	
eun me		EARTH KWI LLC			
SUBJEC	ïr:		ted Liability Company		
The encle	osed Articles of a	Amendment and fee(s) are sub-	nitted for filing.		
Please re	turn all correspo	ndence concerning this matter t	to the following:		
		Cheyenne Moseley			
			Name of Person		
		Legalzoom.com, Inc.			
			Firm/Company	<del> </del>	
		101 N Brand Blvd 11th Fl			
			Address		
		Glendale, CA 91203		-	
			City/State and Zip Code	<del></del>	
		evaweinberg777@gmail.com			
		E-mail address: (t	o be used for future annual repo	ert notification)	
For furth	er information co	oncerning this matter, please ca	II:		
Cheyenn	e Moseley		800 773-08 at ()	388	
	Name of	Person	Area Code I	Daytime Telephone Number	_
Enclosed	is a check for th	e following amount:			
□ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55,00 Filing Fee & Certified Copy tadditional copy is enclosed	□ \$60.00 Filing For Certificate of S  Certified Copy (additional copy is	tatus &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CURE FOR EARTH KWI LLC		
( <u>Name of the Limited Liability Com</u> (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
he Articles of Organization for this Limited Liability Compan	y were filed on 10/29/2020	and assigned
orida document number L20000344094		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited lia	bility company here:	
ne new name must be distinguishable and contain the words "Limited Lial	bility Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:		<i>₽</i>
Principal office address MUST BE A STREET ADDRESS)		2020
and the state of t		
nter new mailing address, if applicable:		<del></del>
Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered egistered agent and/or the new registered office address he   Name of New Registered Agent:  New Registered Office Address:	<del>-</del>	enter the name of the
	Enter Florida street address	
	, Floric	
	Circ	Zin Code

## 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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	WEINBERG, DAVID	19 SOMBRERO BLVD	
		KEY WEST, FL 33050	U Add
			■ Remove
			Change
MGR	EVA WEINBERG	108 DUVAL ST	
		KEY WEST, FL 33040	□ Add
			☐ Remove
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ctive date, if other th	an the date of f	iling:		(oț	otional) fter filing.) Pursuant to 605.0
effective date is listed, the comment is listed and inserted in iment's effective date or inserted in	rthis block does r	iot meet the app	licable statutory t	or more than 90 days a ding requirements.	fter filing.) Pursuant to 605.0 this date will not be listed
ecord specifies a do le 90th day after th			not an effectiv	e time, at 12:0	1 a.m. on the earlie
d Nov	30th	.26	<u>.0</u> .		
V 1					

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee