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COVER LETTER

Registration Section

TO:

Division of Corp	porations		
cup if or.	Kiawa	LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Paola Andre	a Salamanca Projection	as
	KIA	WA LLC Firm/Company	
	2423 M	Kinley St.	
		City/State and Zip Code	
		5 Pa @gmail.(om to be used for future annual report not	ification)
For further information co	oncerning this matter, please c	all:	
Paola Sala	aman(9 Person	at (A07) 860- Area Code Daytin	- 9460 ne Telephone Number
Enclosed is a check for th	e following amount:		
S \$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)
Mailing Address Registration S	Section	Street Address: Registration Se Division of Co	
Division of C P.O. Box 632	7	The Centre of	Tallahassee
Tallahassee, I	·L 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KIAWA I	LIC
(<u>Name of the Limited Liability</u> (A Florida Li	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Con Florida document number <u>L2000357824</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ted liability company here:
KAWUNILL	ted Liability Company," the designation "LLC" or the abbreviation "L.L.C."
The new name must be distinguishable and contain the words "Limited	
Enter new principal offices address, if applicable:	1245 Michigan Ave
(Principal office address MUST BE A STREET ADDRE.	Essy Winter Park, FL 327895.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2423 MCKINley St GI Hollywood, FL 32789
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, enter the name of the new registere
Name of New Registered rigent.	Paola Andrea Sollamanca Rojas
Game Azent"	Enter Florida street address
W.	Jinter Park, Florida 32789 Zip 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

<u>Title</u>	Name	Address	Type of Action
<u>My</u> (Paola Andrea Salannar	nca Rojas	Keep Same.
		1245 Michigan Ave. Winter Park, FL 32789	□Remove Kecp Scivit Membol □Change
-			□Add
			□Remove
			□ Change
			□ Remove
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			□Add
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ective date, if other than the date of filing:			
neffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after tiling.) Pursuant to 605.02 tee: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed current's effective date on the Department of State's records. Excord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed. The 404 FT CO24 F			
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