# L30000377560

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE TALLAHASSEE, FL

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July 25, 2024

KLINT R. PEACOCK 4010 NW 120TH WAY SUNRISE, FL 33323

SUBJECT: KRP SERVICES, LLC Ref. Number: L20000377560

We have received your document for KRP SERVICES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Pleased complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 224A00016443

Morgan E Lovett Regulatory Specialist II 7024 AUG -8 PH 4: 55

www.sunbiz.org

## **COVER LETTER**

TO: Registration So Division of Co				
KRP SERV	VICES LLC			
3000LC1.	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	KLINT PEACOCK			
		Name of Person		
	KRP SERVICES			
		Firm/Company		
	4010 NW 120TH WAY			
		Address		
	SUNRISE, FL 33323			
	KLINTPE@GMAIL.COM	City/State and Zip Code	<del></del>	
	<del>-</del>	to be used for future annual report notific	cation)	202 SE
For further information c	oncerning this matter, please c	all:		4 AUG CRE
KLINT PEACOCK		850 346-7776		SECRETARY OF STALLAHASSEE.
Name o	f Person		Telephone Number	PH I
Enclosed is a check for the	na fallawina ana wat			4: 55 STAT
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□ \$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 \$1a Certified Copy (additional copy is er	atus &
Mailing Addres	is:	Street Address	<b>1</b>	4

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

#### KRP SERVICES LLC

( <u>Name of the Limited Liabi</u> (A Florid	lity Company as it now appears on our recorda Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability (Florida document number L20000377560	Company were filed on 12/2/2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2024 A SECR
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, <u>ente</u>	r the name of the new Rester
Name of New Registered Agent:		4: 55 STATE
New Registered Office Address:		
	Enter Florida street addre	ess
<del></del>		lorida
	City	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 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 Name		Address	Type of Action		
ST	KAREN LAVANDOSKY	4010 NW 120TH WAY, SUNRISE. FL 33323			
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ffective date, if other than the an effective date is listed, the date in ote: If the date inserted in this becoment's effective date on the line.	ust be specific a block does no	and cannot be prior t meet the applic	able statutory fi	r more than 90 days ling requirements	after filing ) Pur	suant to 605.02 not be listed	207 (3 as the
record specifies a delayed effecti is filed.	ive date, but r	iot an effective ti	ime, at 12:01 a.r	n. on the carlier o	f: (b) The 90	ih day after ti	he
ated	····	2024					
Make							
_/- /-	Signature of	a mambar ar auth	arized common arize				
	Signature of	a member or auth	orized representati	ive of a member			