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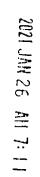
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O SIMMON: MAR 0 9 2021

COVER LETTER

Tallahassee, FL 32314

TO: Registration S Division of Co			,
SUBJECT: K	AYS ENTER	RPMSE LL	
<u> </u>		nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
	Kas	SAN Myers)
	Kay	s Enterprise	LLC
	7900	NW 27th Ave	nue, Suik 234
	Mia	ni FZ 3314	<u> </u>
	E-mail address:	City/State and Zip Code Chterprise 80 (to be used for future annual report noti	e gmail. wm
For further information	concerning this matter, please of	call:	
Kassan	Myers	at (770) 468 Area Code Daytim	8-4367 e Telephone Number
Enclosed is a check for	the following amount:		
\$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 Addre		<u>Street Address:</u> Registration Se	ction
Registration Division of (Registration Sec Division of Cor	
P.O. Box 633	•	The Centre of T	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KAYS ENTERPUSE LOZLIAGES AH 7: 11

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

the Articles of Organization for this Limited Liability Company were filed on Desember 14, 2020and assigned lorida document number L20000 390 912. This amendment is submitted to amend the following: The new name must be distinguishable and contain the words "Limited Liability Company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." on the abbreviation "L	lorida document number <u>L20000 390 91.2</u>	4 2020 and assigned
orida document number L20000 390 912 ins amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: e new name must be distinguishable and contain the words "Limited Liability Company," the designation "L1.C" or the abbreviation "L,L,C." after new principal offices address, if applicable: wincipal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	orida document number <u>L20000 390 912</u>	
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Enter Florida street address , Florida	Name of New Registered Agent.	
, Florida		
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City Zip Code		a
	City	Zip Code

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.

It 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 2021 JAN 26 AH 7: 11	Type of Action
AMBR	Kassan Myers	1117 N.W. 58 TERR. Miami, FZ 33127	∴ X Add
		Miami, FZ 33127	□Remove
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Effective date, if other than (If an effective date is listed, the dat Note: If the date inserted in the document's effective date on the second seco	te must be specific and his block does not m	cannot be prior to date oneet the applicable sta			
he record specifies a delayed efford is filed.	fective date, but not	an effective time, at 1	2:01 a.m. on the ea	arlier of: (b) The 90	th day after the
Dated Sanuary	21	2021			
	Maria	11/10			
	Signature of a m	nember or authorized re	presentative of a men	iber	

Filing Fee: \$25.00