L20000393655

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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· COVER LETTER

Division of Cor		•	-
SUBJECT: Ro	yal KNIGHTS	INVESTMENTS ted Liability Company	2220
	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	Kon-Dona	T GERMAIN Name of Person	V1E
	ROYAL KNI	Firm/Company	1ENTIS LLC
	8297 CHAMI	PIONS GATE Blvd Address	#357
	CHAMPIONS	City/State and Zip Code	596
	E-mail address: (t	o be used for future annual report notifi	ication)
For further information co	oncerning this matter, please ca	ili:	
Row-Dowa T Name of	Person	at (<u>407)</u> 219 Area Code Daytime	7 88 71 Telephone Number
Enclosed is a check for th	ne 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 Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassec, 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

(Name of the Limited Liability Company as (A Florida Limited Liability	INVESTMENTS LLC
(Name of the Limited Liability Company as (A Florida Limited Liabili	it now appears on our records.) ty Company)
The Articles of Organization for this Limited Liability Company were	filed on $\frac{12/15/20}{}$ and assigned
Florida document number <u>L 20000393655</u>	, ,
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of	company here:
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the abbreviation .L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	23
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office addressed and/or the new registered office address here:	ess on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	<u>Address</u>	Type of Action
MGR	Florette Lawson	1151 Kennewick CT	□ Add
		Wesley Chapel for 3345	3 □Remove
			EChange
			□Add
			□Remove
			□Change
			
			Gadd Free C C
			Pi Change 26 Add
			□ Vqq
			□Remove
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			Change

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f an effective date is list Note: If the date inse	erted in this block does	ific and cannot be prices not meet the appl	icable statutory fi	r more than 90 days after	ional) er filing.) Pursuant to 605.0 is date will not be listed	
locument's effective	date on the Departmen	nt of State's record	S.			
record specifies a ded is filed.	elayed effective date, b	out not an effective	time, at 12:01 a.r	m. on the earlier of: (b) The 90th day after (the
. 10	0/2021/	,	·			
Dated // K	/ /	//				
Dated // K		e of a prember or aut	horized representat	ive of a member		

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