L21000003163

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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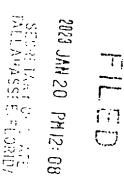
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A. RIVERS

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COVER LETTER

TO:

P.O. Box 6327

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
SUBJECT:	Koulas Rentul	. 1 1 0	
SUBJECT:	Kaylas Rentul Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Francis	(a Clamas Name of Person	
		Firm/Company	
	4613 A	gs: la PL Address	16
	Orlando	FL 32826 City/State and Zip Code	
	E-mail address: (to be used for future annual report notific	cation)
For further information c	oncerning this matter, please c	all:	
	Olamas f Person	at (<u>UNT</u>) <u>UU4.3</u> Area Code Daytime	SIG Telephone Number
Enclosed is a check for the	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 Addres Registration S		Street Address: Registration Sect	ion
Division of C	orporations	Division of Corp	orations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>Kaylas Ken</u>	ita LLC	
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on 12 23 2020	and assigned
Florida document number <u>L2100000 3103</u>	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lir	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the a	ibbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	5	2023
B. If amending the registered agent and/or register		
agent and/or the new registered office address here	:	N 20
	ŗ	mç -e Mi
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	5 2
	Diamin.	
	Florida	Zin Coda

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Freddy Morillo	41613 Agrila PL Orlando, FL 32826	□Add
			⊠ Remove
			□Change
MGR	Francisca Diamas	41013 Agusta Pl Orlando, FL 32826	<u>r_</u> ⊠ Add
		 	□Remove
			□Change
		<u> </u>	🗆 Add
			□Remove
			□Change
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fective date, if other that an effective date is listed, the da ote: If the date inserted in to becoment's effective date on	ite must be specific and this block does not t	d cannot be prior to meet the applicab	date of filing or more the statutory filing req	(optional) an 90 days after filing.) Pu uirements, this date wil	rsuant to 605.0207 I not be listed as t
record specifies a delayed ef is filed.	fective date, but no	et an effective time	e, at 12:01 a.m. on th	e earlier of: (b) The 90	Oth day after the
ned <u>1-20-202</u>	13				
	/ W// .				
	Signature of a	member or authoriz	ed representative of a	nember	