L21000020984

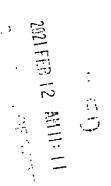
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Common Line)
(Document Number)
(Document Number)
Cadificat Carina
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700359786787

02/12/21--01012--029 **25.00



B 3/3/121

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Kottcamp Tuk Publishing IIC Name of Limited Ciability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Quentin VAN Clerf Name of Person
Kottcamp Tuk Publishing 11C
704 Katherine St
S. DAY tona FL 32119 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person
Enclosed is a check for the following amount:
☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address: 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

(Name of the Limited	Liability Company as Florida Limited Liabil	s it now appear	2 OU OHL Lecol	<u>hing</u>	<u></u>	_
The Articles of Organization for this Limited Liab	oility Company wer	e filed on	1	12021	and ass	igned
Florida document number <u>L 2 1000</u>	07098	4				
This amendment is submitted to amend the follow	ring:					
A. If amending name, <u>enter the new name of th</u>	he limited liability	company he	ere:			
The new name must be distinguishable and contain the word	ds "Limited Liability C	ompany," the d	esignation "LL	C or the abbr	eviation "L.	L.C."
Enter new principal offices address, if applicab	ole:					
(Principal office address MUST BE A STREET.	ADDRESS)		_			
	_					
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BC	<u> </u>					
						
B. If amending the registered agent and/or reg		ress on our re	ecords, <u>ente</u>	r the name		
agent and/or the new registered office address	<u>nere</u> :				٠.	2021
Name of New Registered Agent:	Quen-	tin '	JAN	Cled	<u>.</u> F	2021 FEF
New Registered Office Address:						72 :
		Enter Flor	ida street addr	ess		量三二
			, F	lorida	- : ·	
		City			Zip Code	<u> </u>
New Registered Agent's Signature, if changing Res	gistered 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>	<u>Name</u>	Address	Type of Action
MGR	Quentin Van. Cleef	704 Katherinest	Add
		Daytona, FL 32119	□Remove
			□Change
			□Add
			□Remove
			Change
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			Change
			□Add
			□Remove
			□Chance

-	
-	
_	
-	
_	
-	
-	
-	
-	
_	
_	
_	
-	
-	
_	
_	
ii an eii <u>Note:</u>	we date, if other than the date of filing: (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
e recor rd is fil	d 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 ed.
Dated	1-9-2021
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00