L21000057828

(Rec	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Registration Section Division of Corporations

. TO:

ON USE AND AND ADDRESS.	TORS LLC					
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ndence concerning this matter	to the following:				
	KAROLLOMANTO					
		Name of Person				
	KSL REALTORS					
		Firm/Company				
	1100 BRICKELL BAY DI	R 111				
		Address				
	MIAMI FLORIDA 33131					
		City/State and Zip Code			2527	
	KS.LOMANTO@GMAIL.			- ,		٠
	E-mail address: (to be used for future annual report notif	ication)	•	: û	as F
For further information e	oncerning this matter, please c	all:			زر) جور	1 ·
KAROL LOMANTO		305 9008105			77 2:	ţ
Name o	f Person	Area Code Daytime	Telephone Number	111	ယ္ထ	
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 Filin Certificate (Certified Co (additional cop	of Status opy		
Mailing Addres Registration S		Street Address: Registration Sec	ction			
Division of C	Corporations	Division of Corp				
P.O. Box 632 Tallahassee, l		The Centre of T	allahassee Street, Suite 810)		
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Tallahassee, FL 32303

QWIK COURIER

850-284-4584

Customer/Company that placed the order.	
Contact information:	
THE TOUR ON A SECOND SE	
PLEASE PROCESS THE FOLLOWING.	
PLEASE DO NOT PUT OUR NAME ON COVER LETTER.	
PLEASE USE NAME ON THE REQUEST.	
PLEASE PUT IN OUR BOX WHEN COMPLETED	" []
CUSTOMER: Karol Lomanto	17 (7)
COMPANY: KSL Real tors UC	
Amendment	
THANK V	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KSL REALTORS LLC		
(<u>Name of the Limited Lia</u> bili (A Florida	ty Company as it now appears on our red Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Colorida document number L21000057828	Company were filed on 02/02/2021	and assigned
	<u>_</u> .	
This amendment is submitted to amend the following:		
. If amending name, enter the new name of the limit	ited liability company here:	
KAROL LOMANTO LLC		
he new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	(ESS)	
		<u> </u>
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		70
		N
 If amending the registered agent and/or registered agent and/or the new registered office address here: 	d office address on our records, <u>en</u>	ter the name of the now registers
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	ldress
		, Florida
	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 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
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			□Remove
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Filing Fee: \$25.00