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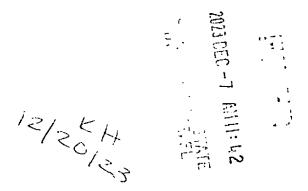
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Office Use Only



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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations	
	ENTS KLD LLC	
SUBJECT:	Name of Limi	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:
	KATHERIM ROMERO	
		Name of Person
		Firm/Company
	1626 COUNTRY LAKES	DR APT 204
		Address
	NAPERVILLE IL 60563	
		City/State and Zip Code
	katherimromero@gmail.com	to be used for future annual report notification)
For further information c	oncerning this matter, please co	_
Katherim Romero		941 9600097
Name o	f Person	Area Code Daytime Telephone Number
Enclosed is a check for the	he following amount:	all:  941 9600097  at (
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, File Certified Copy (additional copy is enclosed)  S60.00 Filing Fee, File Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration	Section	Street Address: Registration Section
Division of C P.O. Box 632		Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INVESTMENTS K L D LLC					
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on our re Liability Company)	ecords.)		
				_ and assig	gned
This amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name of	f the limited liab	ility company here:			
The new name must be distinguishable and contain the	vords "Limited Liabil	lity Company," the designation	"LLC" or the abbro	viation "L.L	.C."
255 C OD ANCE AVENUE Suite		JE Suite 104			
If amending name, enter the new name of the limited in new name must be distinguishable and contain the words "Limited I. ter new principal offices address, if applicable: incipal office address MUST BE A STREET ADDRESS address, if applicable: enter new mailing address, if applicable: ailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address here:  Name of New Registered Agent:  New Registered Office Address:  KATHERI New Registered Office Address:		ORLANDO FL 32801			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		255 S ORANGE AVENU ORLANDO FL 32801	JE Suite 104		
		address on our records, <u>e</u>	nter the name o	2023 Dew	registere
Name of New Registered Agent:	KATHERIM R	OMERO		至三	a [ ] 
New Registered Office Address:	255 S ORANG	E AVENUE Suite 104	<u>-</u>	<u> </u>	
-		Enter Florida street a		tai 10	,
	ORLANDO		_, Florida <u></u>	1 7: 0 1	
		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. Thereby 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
MGRM	LOT EDINSON SUAREZ	4117 FORRESTAL PL	<b>≣</b> Add
		ORLANDO, FL 32806	□Remove
			□Change
MGRM	KATHERIM B ROMERO SANCI	15370 ARCADIA BLUFF LOOP	□ Add
		WINTER GARDEN, FL 34787	■Remove
			Change
MGRM	REYNA ROSALES ARAISA	1244 KINGS CROSS APT 201	🗏 Add
		WEST CHICAGO 1L, 60185	□ □ Remove □ □ □ Change □ □ □ Add
			FIN ORemove
			□Change
			□Remove
			□ Change
			□Add
			□Remove
			□Change

Effective date, if other than the date of filing:  (optional)  If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuani to 603,0207  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The record 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 rd is filed.  NOVIEMBRE 27  2023  Signature of a member waithorized representative of a member									<del>_</del>
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Filing Fee: \$25.00