L21000090477

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2023 OCT 27 / EH 10: 20



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Kill it with Kay LLC Name of Limited Liability Company
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kayle Valdez
Name of Person
Firm/Company
15524 SW 113th ST.
Address
Miami, FL 33196 City/State and Zip Code
E-mail atteress: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kayle Valdez Name of Person at (780) 879 - 9785 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status □ \$55.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certificate of Status □ \$60.00 Filing Fee, Certificate Opy □ \$60.00 Fil

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

Kill it with	a Kou LLC.	2023 COT 27 7.3 10: 21
(Name of the Limited Li (A F	ability Company as it now appears on lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabili Florida document number <u>L210009047</u>	7	/23 /2021 and assigned
This amendment is submitted to amend the followin	g:	
A. If amending name, enter the new name of the		
The Girl Spot Solutions, LI The new name must be distinguishable and contain the words.	_C	
The new name must be distinguishable and contain the words	"Limited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	·	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
		<u> </u>
B. If amending the registered agent and/or regist		ds, enter the name of the new registered
agent and/or the new registered office address he	<u>re</u> :	
Name of New Registered Agent:		
New Registered Office Address:		-
	Enter Florida s	treet address
_	The.	, Florida Zip Code
	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>	Name	Address	Type of Action
			□Add
			Remove
			□ Add
			Remove
			☐ Change
			□Add
			□ Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
		 	□Remove
			Change

If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
	7,2,
Effect	tive date, if other than the date of filing:(optional) Tective 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 (
Note:	Tective 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 the nent's effective date on the Department of State's records.
reco d is f	rd 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 iled.
ated	10/18/23 1:43pm
	Signature of a stember of authorized representative of a member
	Kayle Valdez
	Typed or printed name of signee

Filing Fee: \$25.00