## L21000104441

(Re	questor's Name)	
(Add	dress)	<del>-</del>
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Ви	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



500364359285

U6/U7/21--81U31--U01 \*\*25.00

7/1/21

## **COVER LETTER**

TO:

**Registration Section** 

Div	ision of Corp	orations				
SUBJECT:	KAIROS INVESTMENT LLC					
SUBJECT.		Name of Lim	ited Liability Company	<del></del>		
The enclosed	l Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	dence concerning this matter	to the following:			
		ANGELICA BROWN				
			Name of Person			
		KAIROS INVESTMENT	LLC			
		· · · · · · · · · · · · · · · · · · ·	Firm/Company			
		15420 SW 136 ST, UNIT	32			
			Address			
		MIAMI FL 33196				
			City/State and Zip Code			
		angielilian44@gmail.com				
		E-mail address: (	to be used for future annual report	notification)		
For further in	iformation coi	ncerning this matter, please ca	all:			
ANGELICA	BROWN		786 3552816 at ( )			
	Name of I	Person		time Telephone Number		
Enclosed is a	check for the	following amount:				
\$25.00 F		□ \$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 radditional copy is enclosed.		
	ling Address: distration Se		<u>Street Address</u> Registration			
-	distration Serision of Co.		Division of C			
	Box 6327	L =		f Tatlahassee		
Tal	lahassee EI	32314	2415 N. Mor	roe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KAIROS INVESTMENT LLC

( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on ou Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability Co Florida document number <u>L21000104441</u>	ompany were filed on 03/03/202	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	•• ••
3. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records.	enter the name of the new regis
gent and/or the new registered office address nere.		
Name of New Registered Agent:	<del></del>	
New Registered Office Address:		
	Enter Florida stree	t address
	<del></del>	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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being adde</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ORLANDO FERNANDEZ	16259 SW 81 STREET, MIAMI FL 33193	<b>=</b> Add
			□Remove
		<del>-</del>	□ Change
AMBR	ELIAS GUERRERO		□Add
		18255 NW 68 AVE. APT 219 Hialeah, FL 33015	Remove
			□Change
			□Add
			□Remove
			🗆 Change
			🗆 Add
			□Remove
			□Change
	<del></del>		
			□ Remove □ Change
			:□Ghange
		1	NDAdd
			□Remove
			Change

<del></del>						
	_					
						<del></del>
					- <u>-</u>	
			-		<del></del>	<del></del>
<del></del>						
	· · · · · · · · · · · · · · · · · · ·				<del></del>	
	_					
		<del></del>			<del></del>	
						<del></del>
					<del></del>	
		<del></del>				<del> </del>
					,==	
fective date	, if other than the d	late of filing:			for	ptional)
an effective dat	e is listed, the date must l	he specific and ca	annot be prior to	date of tiling or n	nore than 90 days a	ifter filing.) Pursuant to 605.02
	te inserted in this bloc ective date on the Dep			le statutory film	g requirements,	this date will not be listed
	,					
record specific	es a delayed effective	date, but not ar	n effective time	e, at 12:01 a.m.	on the earlier of:	: (b) The 90th day after th
is filed.	·					23
ited		• • .		· ` ^		: 1
			000	()		J. 1. 7
			all Ibru	~1		2 ( )
			41			
	S	ignature of a me	mber or authoris	red representative	of a member	<u>्</u> सु

E::: E 03=04