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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	- <u></u>
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: The Kids Party Company LLC 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:
Elizia Kennedy Name of Person
The Kids Party Company Firm/Company
8429 Lorraine Rd. PMB 116
Sarasota, FL 34202 City/State and Zip Code
Henetine party rentals (agmail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Elizia Kennedy at (941) 685-8872 Name of Person Area Code Daytime Telephone Number
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**

The Kids Pacty Company 110

FILED

1hc Kids Part	1 Come	pany, ILI.	2024 11 15	<u> 8: 57</u>	
(A	Florida Limited L	iability Company)	iur recorus.	, É	
The Articles of Organization for this Limited Liab	ility Company	were filed on	1		
Florida document number					
This amendment is submitted to amend the following	ing:				
A. If amending name, enter the new name of th	e limited liabi	lity company here:			
The new name must be distinguishable and contain the word	ls "Limited Liabil	ity Company," the designo	ntion "LLC" or the ab	obreviation "L.L.C."	
Enter new principal offices address, if applicable	le:	Elizia Ke	ennedy		
(Principal office address MUST BE A STREET	<u>4DDRESS)</u>	3524 H.	dden Cre	ck Blid.	
		<u>Sarasota,</u>	FL 342	10	
Enter new mailing address, if applicable:		8429 Lor,	-aine Rd		
(Mailing address MAY BE A POST OFFICE BOX)		8429 Lorraine Rd Lakewood Ranch, FL 34202			
B. If amending the registered agent and/or regi		ddress on our record	is, <u>enter the nam</u>	e of the new registered	
Name of New Registered Agent:	Elizio	Kennedy			
New Registered Office Address:	3524	H.dden C Enter Florida su	reet address	<u>ud .</u>	
_	Saras	S O + Q City	, Florida	34240	
		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, 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>	<u>Address</u>	Type of Action
MGR	Elizia Kennedy	3524 Hidden Creek Blud	·_ 凹入dd
		Sarasota, FL 34240	□Remove
			□Change
			🗆 Add
			□Remove
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	Sarah Evans is no longer the owner
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Effection of the control of the cont	e date, if other than the date of filing:
Note:	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a
iocumo	nt's effective date on the Department of State's records.
record d is file	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
a is the	a.
Dated	Elizea Kennedy Signature of a member or authorized representative of a member
	Clisia Kennedy

Filing Fee: \$25.00