LZ1000167989

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO:

FO: Registrat Division					
	TRE CO	USULTING LLC			
SUBJECT:		Name of Lim	ited Liability Company		<u> </u>
			1.C. GI		
		amendment and fee(s) are sub-			
Please return all co	orrespon	dence concerning this matter	to the following:		
		BAKILA ARABU			
		-	Name of Person		
		KAFIRE CONSULTING I	LC		
			Firm/Company		
		14865 SW 29TH AVENU	E ROAD		
		<u> </u>	Address		-
		OCALA, FL 34473			
			City/State and Zip Cod	le	
		KAFIRECONSULTING@0			
For further inform	ation co	E-mail address: (ncerning this matter, please ca	to be used for future annu	al report notificati	ion)
BAKILA ARABU				398-4899	
	Name of	Person	at () Area Code		lephone Number
,	ranic or	i Cison	nea code	Daytime rea	repriorie (varioe)
Enclosed is a chec	k for the	following amount:			
□ \$25.00 Filing	Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fe Certified Copy (additional copy is a		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing A				Address:	n
Registra Division		ection orporations	-	tration Sectio ion of Corpor	
P.O. Bo	x 6327	7	The C	Centre of Talla	ahassee
Tallahas	ssee, F	L 32314	2415	N. Monroe St	reet, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KAFIRE COUNSULTING LLC		
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 04/12/2021 and assigned		
The Articles of Organization for this Limited Liability Company were filed on $\frac{04/12/2021}{12/2021}$ Florida document number $\frac{L21000167989}{12/2021}$.	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
KAFIRE CONSULTING LLC		
The new name must be distinguishable and contain the words "Limited 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 ADDRESS)		
Enter new mailing address, if applicable:	_	
(Mailing address MAY BE A POST OFFICE BOX)		
	202	
B. If amending the registered agent and/or registered office address on our records, enter the	he name of the new registered	
agent and/or the new registered office address here:		
	1	
Name of New Registered Agent:		
New Registered Office Address:	4	
Enter Florida street address		

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.

City

Florida_

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
			□Add
			□Remove
			□Add
			□Remove
			□Change
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KAFIRECONSULTING	@GMAIL.COM			
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ective date, if other than	the date of filing:	I	(optional)	
effective date is listed, the dat	e must be specific and cannot be price	or to date of filing or more than	90 days after filing.) Pursuant to	605.0207
	is block does not meet the appli he Department of State's record		rements, this date will not be	listed as
	ective date, but not an effective	time, at 12:01 a.m. on the	earlier of: (b) The 90th day	after the
s filed.				
MAY 14	2021			
<i>n</i>	1/2 /2 /	······································		
-15 1/1/1/	1 Markala	_		

Typed or printed name of signee