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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Att. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Search Signature Signature Driving Record Requested by: Name Date Time UCC 10 r3 File UCC 11 Search UCC 11 Retrieval UCC 10 Retrieval	Kenneth Ossowic	cz <u>LLC</u>			
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Photo Copy					Annual Report / Reinstatement
Certificate of Good Standing					Cert. Copy
Certificate of Status					Photo Copy
Certificate of Fictitious Name					Certificate of Good Standing
Corp Record Search					Certificate of Status
Officer Search					Certificate of Fictitious Name
Fictitious Search					Corp Record Search
Fictitious Owner Search Vehicle Search Vehicle Search Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval UCC 11 Retrieval Courier Couri					Officer Search
Vehicle Search					Fictitious Search
Driving Record	Signature				Fictitious Owner Search
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Name Date UCC Retrieval Walk-In Will Pick Up Courier	Requested by:				UCC 1 or 3 File
Walk-In Will Pick Up Courier	Name	Date	Time		
		-			Courier

COVER LETTER

TO: Registration S Division of Co			
Kenneth O SUBJECT:	ssowicz LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sul	bmitted for filing.	
	ondence concerning this matter	·	
	Kenneth Ossowicz		
		Name of Person	_
	Kenneth Ossowicz LLC		
		Firm/Company	
	3022 SW 41st Ter		
		Address	 _
	Cape Coral, FL 33914		
		City/State and Zip Code	
	ccfirelt@gmail.com		
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report nall:	otification)
Kenneth Ossowicz		239 707-3110 at ()	
Name o	of Person		inte Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	□ \$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 (additional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration S	Section
Division of C	orporations	Division of Co	
P.O. Box 632		The Centre of	Tallahassee
Tallahassee, I	『レ 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kenneth Ossowicz LLC

(Name of the Limited Liability Company as it now appears on our records.)	
(A Florida Limited Liability Company)	

(Name of the Limited Liability) (A Florida)	ty Company as it now appears on our records.), · · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability C Florida document number L21000188547	Company were filed on 04/22/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ited liability company here:
The new name must be distinguishable and contain the words "Limi	ited 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 ADDR	(ESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	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 2-21777 - 4 P.7 4: 00	Type of Action
MGR	Kenneth Ossowicz	3022 SW 41st Ter Cape Coral, FL 33914	
			_
			Change
			□Add
			🗆 Remove
			□Change
			□Add
			□Remove
			□Change
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			□Remove
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			□ Change

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Effective date, if other than the	date of filing: (ontional)
f an effective date is listed, the date must	date of filing: (optional) a be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as
e record specifies a delayed effective	e date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
rd is filed.	a date, out not an effective time, at 12.01 a.m. of the earlier of. (b) The 90th day after the
Dated May 3	2021
Kenneth Osso	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
Kenneth Ossowicz	
	Typed or printed name of signee

Filing Fee: \$25.00