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mited Liability Company	
abmitted for filing. er to the following:	
Name of Person	
Firm/Company	
notice why 86275	<u> </u>
Each, FL 33708 City/State and Zip Code	·
no 12 @ gmail Com (to be used for Gure annual report notif	
call:	
at (<u>61°</u>) <u>316 -</u> Area Code Daytime	Telephone Number
S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Street Address: Registration Sec	*io
1 2	Name of Person Cocae C

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

Kroeger Digital LLC

(Name of the Limited Liability (A Florida)	Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number <u>Ĺ 210002022</u> 25	ompany were filed on $\frac{4/30/2021}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ed liability company here:
Kroeyer Digi + The new name must be distinguishable and obtain the words climit	ed Liability Company," the designation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRI	15019 Mudiera Way 86275 Madiera Bauch, FL 33708
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 86275. Madiera Beach, FL 33708
B. 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 registered
Name of New Registered Agent: LISA	2 Kroeger
New Registered Office Address: [50]	9 Machera Way 86275 Enter Floridd street address
Mad	1ea Beuch Florida 33708 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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			Remove
			Change
		□Add	
		Remove	
			Remove
		□Add	
			
			□Change

Effor	tive date if other than the date of filing: (antional)
Note	tive date, if other than the date of filing:
the reco	ord 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 filed.
	June 24 2021 /