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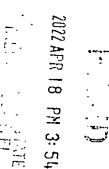
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Cf 5/31/2022

COVER LETTER

TO: Registration S Division of Co				
Helo Healt	th LLC			
SUBJECT:	Name of Limit	ed Liability Company		
The enclosed Articles of	f Amendment and fee(s) are subn	nitted for filing.		
Please return all corresp	ondence concerning this matter t	o the following:		
	Yehuda Frid			
	- ,	Name of Person		
	George D. Perlman PA			
		Firm/Company	•	
	1441 Brickell Ave, Suite 14	00		
		Address		
	Miami, FL 33131			
	yehuda@gplawintl.com	City/State and Zip Code		
		be used for luture annual report noti	fication)	
For further information	concerning this matter, please ca	B:		
Yehuda Frid		305 3745646		
Name o	of Person	at () Area Code Daytim	e Telephone Number	
Enclosed is a check for t	the 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)	
<u>Mailing Addre</u> Registration		Street Address: Registration Sec	ction	
Division of C	Corporations	Division of Cor	porations	
P.O. Box 633	21	The Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



The Law Offices Of George D. Perlman, P.A.

George D. Perlman SV, 11
Brett Bernstein, Associate SV, 11
Jennifer Haime, Associate DC, 11

Of Counsel to Robert Allen Law E-Mail: george@gplawint.com The Four Sensons Office Tower 1441 Brickell Avenue Suite 1400 Miami, Florida 33131 Tel.: (305) 374-5646

April 12, 2022

Sent via Fedex: 7765 5854 2390

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Re: Helo Health LLC

File: 100329.002

Dear Sir/Madam.

Please find enclosed the Articles of Amendment to Articles of Organization of Helo Health LLC along with check no. 26761 in the amount of \$55.00.

Should you have any questions or concerns regarding the above, please do not hesitate to contact us directly at george a gplawintl.com or (305) 374-5646.

Sincerely

Knnifer Car

Secretary to George D. Perlman

Encl GP:je

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 APR 18 PM 3: 54

TALL MODEL FL

Helo Health LLC

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

Florida document number L21000255851	Company were filed on $\frac{06/02/2021}{}$	and assigned
Florida document number	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
KIKKIN USA LLC		
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register agent and/or the new registered office address here Name of New Registered Agent:		r the name of the new registered
Name of New Registered Agent:		r the name of the new registered
agent and/or the new registered office address here		
Name of New Registered Agent:	Enter Florida street addre	NS.
Name of New Registered Agent:	Enter Florida street addre	
Name of New Registered Agent:	Enter Florida street addre City	NS.

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
		. <u> </u>	□Add
			□Remove
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			□Change
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Hective date, if other than the date of filing: an effective date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 ofte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste occurrent's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after its filed.								_
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Signature of a member or authorized representative of a member			Signa	ture of a member	or authorized i	epresentative of a	member	

Filing Fee: \$25.00