L21000296004

(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
· <u>-</u>		
Special Instructions to	Filing Officer	

Office Use Only



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Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

ORDER FORM

TO Florida Department of State

FROM Me

Melissa Moreau

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

850.656.7953

corphelp@dos.myflorida.com

850-245-6051

REQUEST DATE 02/29/2024

PRIORITY Routine

OUR REF # (Order ID#) Devon

ORDER ENTITY

Unitus LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

Unitus LLC

Please file the attached amendment.

NOTES:

\$25.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Unitus LLC		2024 FE	TB 29 124 9: 04
(Name of the Limi	ted Liability Company as it now appe: (A Florida Limited Liability Company)	urs on our records.)	= 5 - 711 9: 04
The Articles of Organization for this Limited I Florida document number L21000296004	iability Company were filed on	ine 25, 2021	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company h	ere:	
Kingdom Enterprises Worldwide, LLC			
The new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if appli-	cable:		
(Principal office address MUST BE A STREI			
•			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE			-
		•	
B. If amending the registered agent and/or	registered office address on our	records, <u>enter the</u> nan	ne of the new registere
agent and/or the new registered office addre	ss here:		
Name of New Registered Agent:	Corporation Service Company		
New Registered Office Address:	1201 Hays Street		
	Enter Flo	orida street address	
	Tallahassee	Florida _32	2301
	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.

Kelly Marinelli

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	
			Change
	 -		□ Add
			□Remove
			Change

ameno	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
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<u>vic.</u> 11 1	date, if other than the date of filing:
ecord sp is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted	bruary <u>27</u> 2024
	Add
	Signature of a member or authorized representative of a member