## K21000310550

(Requ	estor's Name)	
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(City):	state/Zip/Pflone	e #;
PICK-UP	MAIT	MAIL
(Busin	ness Entity Nar	ne)
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Certified Copies	Certificates	s of Status
Special Instructions to Fil	ing Officer:	

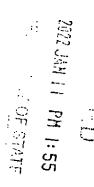
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## **COVER LETTER**

	ision of Cor			
SUB INCT:	Amendmen	nt & Name Changes		
SOBJECT.		Name of Limited Liability Company		
The enclosed	I Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		KARLO BEAUVOIR		
			Name of Person	
		KARLO CENTER LLC		
			Firm-Company	
		12275 COLLIER BLVD S	UITE 10	
			Address	<del></del>
		NAPLES , FLORIDA 341	16	
			City/State and Zip Code	<del></del>
		infocenter525@gmail.com	to be used for future annual report no	ori Control
For further in	nformation c	oncerning this matter, please co		nineadon)
KARLO BE	AUVOIR		239 7769817	
	Name o	f Person		me Telephone Number
Enclosed is a	check for th	ne following amount:		
■ \$25.00 F	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)
Reg	iling Address	Section	Street Address: Registration S	
	vision of C ). Box 632	Corporations 27	Division of Co The Centre of	
Tal	llahassee, l	FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	KARLO CENT	TER LLC	
(Name of the Lim	ited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited 1	.iability Company	were filed on KARLO CENTER LU	.C and assigned
Florida document number L21000310550	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	oility company here:	
KARLO CENTER LLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		12275 COLLIER BLVD SUITE 10	
(Principal office address MUST BE A STREET ADDRESS)		NAPLES FL 34116	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		8645 SADDLEBROOK, CIRCLE	E APT 3103
		NAPLES FL 34104	
			202
B. If amending the registered agent and/or		address on our records, <u>enter the</u>	
agent and/or the new registered office addre	ess here:		
Name of New Registered Agent:	KARLO BEAU	JVOIR	OF F
New Registered Office Address:	8645 SADDLE	EBROOK , CIRCLE , APT 3103	· ST.
	- <del>-</del>	Enter Florida street address	म ज
	NAPLES	, Florid	a <u>34104</u>
		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.

h 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
MGR	KARLO BEAUVOIR	8645 SADDLEBROOK , CIRCLE , APT 3103	🗹 Add
		NAPLES FL 34104	□Remove
			□Change
			□Add
			□Remove
			□Change
		□Add	
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			□Add
		<del></del>	Remove
			□Change

D. II am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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•	
-	<del></del>
-	
-	
-	
-	
-	
(If an ef <u>Note:</u>	ive date, if other than the date of filing:  (optional)  (optional)  (ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the cent's effective date on the Department of State's records.
f the recore ecord is fi	d 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 led.
Dated	01/05/2022
	Signature of a member or authorized representative of a member
	KARLO BEAUVOIR
	Typed or printed name of signee