K21000371515

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SECULTARY OF STATE

2023 HOV -8 AM II: 16

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Cor	porations			
	12436 Kitte	n Trail LLC			
SUBJECT:	Name of Limited Liability Company				
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Ricky Burke			
			Name of Person		
		12436 Kitten Trail LLC			
			Firm/Company		
		12436 Kitten Trail			
			Address		
		Hudson, Fl 34669			
			City/State and Zip Code	•	
		patsbunch@yahoo.com			
			to be used for future annual report not	ification)	
For further in	iformation c	oncerning this matter, please co	all:		
Ricky Burke			727 835-9129		
	Name o	f Person	at () Area Code Daytir	ne Telephone Number	
Enclosed is a	check for th	ne following amount:			
X \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	iling Addres		Street Address:		
Registration Section Division of Corporations			Registration Section Division of Corporations		
	7181011 01 C D. Box 632		The Centre of		
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2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

12436 Kitten Trail LLC	N. 111 120 C				
(Name of the Lim	ited Liability Company a (A Florida Limited Liab	s it now appears on our i	recoras.)		
The Articles of Organization for this Limited I Florida document number <u>L21000371515</u>		re filed on	<u>.</u>	and ass	igned
This amendment is submitted to amend the fol	llowing:				
A. If amending name, enter the new name	of the limited liability	company here:			
The new name must be distinguishable and contain the	words "Limited Liability C	'ompany," the designation	"LLC" or the abbrev	viation "L.	L.C."
Enter new principal offices address, if appli	icable:				
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>				
	_				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	<u>EBOX)</u>				
	_				
B. If amending the registered agent and/or agent and/or the new registered office addresses	-	ress on our records, <u>s</u>	enter the name o	<u>f the nev</u>	<u>v registered</u>
Name of New Registered Agent:	Patti Burke				
New Registered Office Address:	12436 Kitten Trail				
	1.	Enter Florida street i	address	-	
	Hudson		_, Florida <u>34669</u>	SEC	2023
		City	_, Florida <u>34669</u>	Zip Code	
New Registered Agent's Signature, if changing				. :	۱
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg	per and complete per	formance of my dutic	es, and I am fam	iliar Wit	h dada

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
ambr	Patti Burke	12436 Kitten Trail, Hudson< Fl 34669	X Add
			□Remove
			Change
			□Add
			□Remove
			□Change
	-		🗆 Add
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			□Change

Effective date, if other than the date of filing: [If an effective 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. Note: If the date inserted in this block does need the applicable statutory filing requirements, this date will not be listed as it document's effective date on the Department of State's records. The 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 the ord is filed. Dated November 01 2021 May May Signature of a member or authorized representative of a member	₩ ¥	nation, enter change(s) here: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing:		
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