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(Requ	uestor's Name)	 _
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2022 APR -4 AM II: 23

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A. BUTLER APR 0 9 2022

COVER LETTER

TO:	Registration Se Division of Cor			•
	Kemei Tran			
SUBJECT: Name of Limited Liability Company				
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Reggi Nelson		
			Name of Person	
		Kemet Transport		
			Firm/Company	
		13566 Teaberry Lane		
			Address	<u>, , , , , , , , , , , , , , , , , , , </u>
		Spring Hill, FL 34609		
			City/State and Zip Code	
		regginelson@gmail.com		
For furth	ner information c	n-mail address: (to be used for future annual report no all:	itteation)
Reggi N	elson		813 7935776 at()	
	Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed	l is a check for th	ne 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)
	Mailing Addres		Street Address:	action
Registration Section Division of Corporations		Registration Se Division of Co		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION [] [] []

Kemet Transport		2022 APR -4	
(Name of the Lim	ited Liability Company as it no (A Florida Limited Liability C)	w appearsion our recor empany) TALLAHA	48F STATE SSEE.FL
The Articles of Organization for this Limited 1	Liability Company were file	ed on 8/20/2021	and assigned
Florida document number L21000374731			
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liability com	pany here:	
Kemet Solutions LLC			
The new name must be distinguishable and contain the	words "Limited Liability Compa	ny," the designation "LL	C" or the abbreviation "L.L.C,"
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE		 	····
(Frincipal office address 51051 BE A STRE	LI ADDRESS)		
Enter new mailing address, if applicable:			
<u>(Mailing address MAY BE A POST OFFICE</u>	<u> </u>		
B. If amending the registered agent and/or agent and/or the new registered office addr		on our records, <u>ente</u>	r the name of the new registered
agene and/or the new registered office addi-	cos nere.		
Name of New Registered Agent:	Reggi Nelson		
New Registered Office Address:	13566 Teaberry Lane		
		Enter Florida street addre	795
	Spring Hill	F	lorida <u>34609</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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Change
			□Add
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Page 2 of 3

	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
 -	
- Effective	date, if other than the date of filing:
(If an effecte <u>Note:</u> If t	we 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 he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the seffective date on the Department of State's records.
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ith day after the record is filed.
Dated 1	bruary 27
	7.2
	Signature of a member or authorized representative of a member
	Reggi Nelson
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00



RECEIVED

2022 APR -4 AM 11: 25

Letter Number: 022A00006475

FLORIDA DEPARTMENT OF STATE Division of Corporations SECREMAN STATE TALLAHASSEE, FL

March 18, 2022

REGGI NELSON 13566 TEABERRY LANE SPRING HILL, FL 34609

SUBJECT: KEMET TRANSPORT LLC

Ref. Number: L21000374731

We have received your document for KEMET TRANSPORT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "Limited Company" or Limited Liability Company or with one of the following abbreviations Ltd. Co., LC, "L.C.," LLC, or L.L.C.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

www.sunbiz.org