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Y. SCOTT JAN 2 9 2022

COVER LETTER

TO: Registration So Division of Cor			•		
	LABORATIONS LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	JESSE TYLER HUGHEY				
	<u> </u>	Name of Person		ر کا	
		JZŽ JA ECRE TALI	•		
		A. Y.	•		
	1578 GRANDE CULL W	ΑY		2022 JAN 24 PM 3: 19 SECRETARY OF STATE TALLAHASSEE, FL	{
		Address		THOUSE CO.	Í
	JUPITER, FL 33458			TATE	
		City/State and Zip Code			
	TYLER@SHOPWILDBLU	IEBOUTIQUE,COM			
	E-mail address; (to be used for future annual report notifi	cation)		
For further information c	oncerning this matter, please ca	all:			
JESSE TYLER HUGHE	Y	561 371-2503			
Name o	t'Person		Telephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	
Mailing Addres Registration 5	Section	Street Address: Registration Sec			
Division of C P.O. Box 632		Division of Corp The Centre of Ta			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

K&T COLLABORATIONS LLC			
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our recor Jability Company)	<u>'ds.</u>)	
The Articles of Organization for this Limited Liability Company Florida document number 1.21000397827	were filed on 9/9/2021	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LL	C" or the altifrevia "L.L.C."	
Enter new principal offices address, if applicable:		Z JAN T	
Principal office address MUST BE A STREET ADDRESS)		AF 2	
Enter new mailing address, if applicable:		PH 3: I	
Mailing address MAY BE A POST OFFICE BOX)		m v	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, <u>ente</u>	r the name of the new registe	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, F	ToridaZip Code	
New Registered Agent's Signature, if changing Registered Agent:			
hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete		• • •	

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, 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	KAITLYN JEAN HUGHEY	9120 DEMERY DR	= Add
		PALM BEACH GARDENS, FL 33410	□Remove
			□Change
		· · · · · · · · · · · · · · · · · · ·	
			SECONOMIC TO ANY CONTRACTOR OF THE PROPERTY OF
			2020JAN 26 PM 3: 19 Remove
			□Change
			□Add
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ective date, if other than the dat	e of filing:			(optional)		
reffective date is listed, the date must be a te: If the date inserted in this block aument's effective date on the Depar	does not meet the app	dicable statute				
cord specifies a delayed effective da s filed.	te, but not an effective	e time, at 12:0	1 a.m. on the earl	ier of: (b) The 9	0th day	after the
DECEMBER 28TH	. 2021					
ted DECEMBER 28TH	. 2021	·				_

Filing Fee: \$25.00