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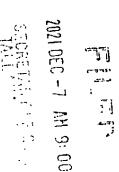
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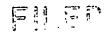
TO:

Registration Section Division of Corporations

SUBJECT: KEI	LE SERVICES LLC		
Somett.	<del> </del>	nited Liability Company	<del></del>
The enclosed Articles	of Amendment and fee(s) are sul	amitted for filing	
		-	
riease return an corres	pondence concerning this matter	r to the following:	
	ULLMANN BLUME F	RANZ	
		Name of Person	<u>.</u>
	KELE SERVICES LLC	:	
		Firm/Company	
	7205 NW 19 TH ST SUI	ГЕ 401	
		Address	
	MIAMI ,FL 33126		
		City/State and Zip Code	
	GLOBALLYCONSULTING	•	
		to be used for future annual report noti	ification)
For further information	concerning this matter, please c	all;	
ULLMANN BLUME	FRANZ .	at ( 786 ) 8621751	
Name	of Person		ne Telephone Number
Enclosed is a check for	the following amount:		
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Cl \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addro Registration Division of 6 P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T	porations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



KELE SERVICES LLC

2021 DEC -7 AM 9: 00

(Name of the Limit	ed Liability Compa (A Florida Limited)	iny as it now appea Liability Company)	rs on our records.) RE	JANY 17 STynn
The Articles of Organization for this Limited L	iability Compan	y were filed _0	9/15/2021	and assigned
on Florida document number <u>L21000402591</u>				
This amendment is submitted to amend the follow	owing:			
A. If amending name, enter the new name of	the limited liab	ility company h	ere:	
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the o	designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	7205 NW 19	TH ST SUITE 401	
(Principal office address MUST BE A STREE	T ADDRESS)	MIAMI, FL.	33126	
Enter new mailing address, if applicable:		7205 NW 19	TH ST SUITE 401	
(Mailing address MAY BE A POST OFFICE I	<u>30X)</u>	MIAMI, FL.	33126	
B. If amending the registered agent and/or reagent and/or the new registered office address	s here:		ecords, <u>enter the n</u>	ame of the new registere
Name of New Registered Agent:	GLOBALLY	AGENT CORP		
New Registered Office Address:	7205 NW 19T	TH ST SUITE 40	ida street address	
	МІАМІ		, Florida	33126
New Registered Agent's Signature, if changing R	egistered Agent:	Gio Hewca	)193 R.	Zip Code
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the re company has been notified in writing of this c	r and complete tered agent as p egistered office hange.	performance of provided for in (	my duties, and I at Chapter 605, F.S. C	n familiar with and Or, if this document is

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MCR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□ Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
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			∏ Change

## Page 2 of 3

,	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an ef Note:	ive date, if other than the date of filing:  [coptional]  fective 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 nent's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	Signature of a member or authorized to presentative of a member
	FRANZ ULLMANN
	Typed or printed name of signee