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			2021 OCT 1			
То:	Division of Corporations Fax Number : (850)617-6383					
From:	Account Name : REGISTERED / Account Number : I2009000008 Phone : (307)200-280 Fax Number : (855)330-10	B AMIO: 17				
nter the	email address for this business	s entity to be used	for future			
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ARTICLES OF AMENDMENT
ТО
ARTICLES OF ORGANIZATION
OF

0	C 051				
Knight Collective LLC	<b>1 0</b>				
Name of the Limited Liability Compa	ny as it now appears on our records.)				
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	Liability Company)				
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000407569</u> .	were filed on 09/14/21 and assigned				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here:				
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:	7901 4TH ST N STE 6296				
(Principal office address MUST BE A STREET ADDRESS)	ST PETERSBURG, FL 33702				
Enter new mailing address, if applicable:	7901 4TH ST N STE 6296				
(Mailing address MAY BE A POST OFFICE BOX)	ST PETERSBURG, FL 33702				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registere</u>				
Name of New Registered Agent:					

New Registered Office Address:

Enter Florida street address

\_, Florida \_\_\_\_\_ Zin 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.

City

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

## MGR = Manager AMBR = Authorized Member

· .

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	KNIGHT, DAVID	7901 4TH ST N STE 6296	🗆 Add
		ST PETERSBURG, FL 33702	🗍 Remove
			Change XI Change
AMBR	KNIGHT, KAILEY	7901 4TH ST N STE 6296	🖸 Add
		ST PETERSBURG, FL 33702	🗋 Remove
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## D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_\_\_(optional) (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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 record is filed.

2021 Dated October 18

Signature of a member or authorized representative of a member

Morgan Noble

Typed or printed name of signee

Filing Fee: \$25.00