Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.*≠

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MOKU LLC

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Corporate Filing Menu

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OCT 2 5 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Moku LLC		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our re isbility Company)	cords.)
The Articles of Organization for this Limited Liability Company Florida document number L21000414707	were filed on 09/20/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
KSZ Advisors LLC		
The new name must be distinguishable and contain the words 'Limited Liabili	ty Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
		, <u>-</u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
		<u> </u>
		<u>-</u>
B. If amending the registered agent and/or registered office as agent and/or the new registered office address here:	ddress on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ad	dress
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as pubeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties rovided for in Chapter 60	, and I am familiar with and 05, F.S. Or, if this document is

U 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

Title	Name	Address	Type of Action
			□Add
			□Remove
			Change
			DAdd
			□Remove
			© Change
			□ Add
			□ Remove
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fective date, if other than to effective date is listed, the date interest in this current's effective date on the	S OLOGA GOES HOL MEEL U	ne annucania an	e of filing or more statutory filing re	(option than 90 days after requirements, this	nal) filing.) Pursuant to 60 date will not be lis)5.02 sted
ecord specifies a delayed effectis filed.	tive date, but not an eff	fective time, a	t 12:01 a.m. on t	the earlier of: (b)	The 90th day aft	er ti
October 24th	202	23				
		•	John F	Perez		
				0		
	Signature of a membe					

Filing Fee: \$25.00