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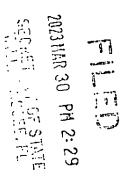
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Y. SCOTT MAY 17 2023

COVER LETTER

TO: Registration Section

Division of Corporations
SUBJECT: Kennger Canera Crew LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
David Keninger
Keninger Carre - Crew LLC
9053 Zavel Ridge Dr 11
Keninger Carred - Cientle 18 23 Firm/Company PARS Address Address City/State and Zip Code Reninger Carred - Cientle 18 23 Renine 18 23 Reninger Carred - Cientle 18 23 Reninger Carred - Cien
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Parid Ken, 1527 at (5/5) 326 25 56 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\frac{1}{2}\$30.00 Filing Fee & \$\frac{1}{2}\$55.00 Filing Fee & \$\frac{1}{2}\$60.00 Filing Fee, \$\frac{1}{2}\$Certificate of Status & \$\frac{1}{2}\$Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Keonagas (soo	· · · · · · · · · · · · · · · · · · ·
(Name of the Limited Liability C	Company as it now appears on our records.) mited Liability Company)
	/
The Articles of Organization for this Limited Liability Comp	
Florida document number <u>L71000 489976</u>	·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	l liability company bere:
Keninger Comera	Cand Crew LLC & E
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRES	SS)
	2 3
Parker and a still a still and the small as block	29 E 29
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	ffice address on our records, enter the name of the new registere
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City 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.

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
			🗀 Add
			□Remove
			□Change
			□Add
			□Remove
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Dated March 26, 2623. Signature of a member or authorized representative of a member		delayed effective date.	, but not a	n effective ti	me, at 12:01 a	.m. on the ea	rlier of: (t) The	90th day a	fter the
Signature of a member or authorized representative of a member	a	ch 26	,	26 z 3						
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