12/17/21, 3:19 PM

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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Account Number : I19980000021 Phone : (863)465-2811 Fax Number : (863)465-6999 Phone

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KJCC LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H21000460082 3)))

(Principal office address MUST BE A STREET ADDRESS)
Florida document number  L21000504495  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  KJCC, LLC  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:
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  KJCC, LLC  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 ADDRESS)
KJCC, LLC  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 ADDRESS)
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:
Enter new mailing address, if applicable:
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
Name Begintered Office Address:
New Registered Office Address:  Enter Florida street address
, Florida
City Zip 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 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

12/17/2021 15:24 8634710008

## If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: (((H21000460082 3)))

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	WOHL, MARTY	502 N. Central Ave., Avon Park, FL 33825	□Add
			□ Remove
		WOHL, MARTIN M.	■Change
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			□Remove
		<del></del>	□Change
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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.

December 15	2021	
	Signature of a member of authorized representative of a member	
Terry Hancock, A	MBR	
	Typed or printed name of signee	

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