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☐ PICK-UP

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(Business Entity Name)

(Document Number)

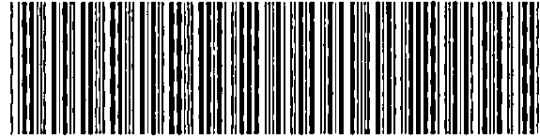
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2023 FEB 17 PM 12:09  
TALLAHASSEE, FLORIDA

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2023 FEB 17 PM 3:37  
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

PLEASE USE FUNDS FROM THIS ACCOUNT: 120210000160 AMOUNT: \$ 30.00

AUTHORIZATION SIGNATURE: *Jan Felt*

AHF & KHF Holdings LLC L22000011117

**Business Name**

**Document Number, (if known):**

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☐ **Certified Copy of the Articles of Organization**

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**NEW FILINGS**

**AMMENDMENTS**

☐ Profit

☒ Amendment

☐ Not for Profit

☐ Designation of R.A. Officer/Director

☐ Limited Liability

☐ Change of Registered Agent

☐ Domestication

☐ Revocation of Dissolution

☐ Other

☐ Merger

☐ **CORP**

☐ **Conversion**

☐ **PLLC**

☐ **Amended and restated Articles**

☐ **Statement of Authority**

**OTHER FILINGS**

**REGISTRATION/QUALIFICATIONS**

☐ Annual Report

☐ Foreign filing

☐ Fictitious Name

☐ Limited Partnership

☐ Reinstatement

☐ APOSTILLE() ☐

☐ Other

**Country**

**EXAMINER'S INITIALS:** \_\_\_\_\_

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
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AUTHORIZATION SIGNATURE: \_\_\_\_\_

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\_\_\_ Walk in

\_\_\_ Pick up time \_\_\_

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  x   Certificate of Status

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\_\_\_ Profit

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\_\_\_ APOSTILLE() \_\_\_

\_\_\_ Other

**Country**

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** AHF & KHF Holdings, 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:

Alec Feintuch

\_\_\_\_\_  
Name of Person

AHF & KHF Holdings, LLC

\_\_\_\_\_  
Firm/Company

320 Plaza Real Apt 307

\_\_\_\_\_  
Address

Boca Raton, FL 33432

\_\_\_\_\_  
City/State and Zip Code

alec.feintuch@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alec Feintuch

954

478-3614

at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime 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)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
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**

AHF & KHF Holdings LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
2023 FEB 17 PM 12:16  
SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on January 4, 2022 and assigned  
Florida document number 1.22000011117.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The Fein Group, 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 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:

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 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**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

[illegible]

**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.

Dated February 11, 2023

Alec Feintuck

Signature of a member or authorized representative of a member

Alec Feintuch

Typed or printed name of signee