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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(233,
(Document Number)
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TO:

TO: Registration Sec Division of Corp		ø	
SUBJECT:	ierotech m	anagement LC	
SUBJECT:		ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Ken	Name of Person	· · · · · · · · · · · · · · · · · · ·
	<u>Koerote</u>	ch Mongamen	t LLC
	4363 NW	90th Terrace	
	Coral Sp	anos, FL 33065	
	Qim. Ke E-mail aldress: (City State and Zip Code Correction to be used for future annual report notifications.	cation)
For further information co	ncerning this matter, please c	all:	
Ken L Name of	Person)	at (95 <u>U</u>) 60 <u>U</u> - Area Code Davtime	7605 Telephone Number
		·	•
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	330,00 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 Se Division of Co P.O. Box 6327 Tallahassee, Fi	ection prporations	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	porations allahassee Street, Suite 810

ARTICLES OF AMENDMENT TO **ARTICLES OF ORGANIZATION OF**

Knowlech Managemen	+ LLC
(Name of the Limited Liability Company as it now (A Florida Limited Liability Com	appears on our records.) pany)
The Articles of Organization for this Limited Liability Company were filed of Florida document number <u>L2200071487</u> .	on February 11, 2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compa	
The new name must be distinguishable and contain the words "Limited Liability 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)	
	2023 H
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 agent and/or the new registered office address here:	our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address: Ent	er 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 provisions of all statutes relative to the proper and complete performan	

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

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>	Name	Address	Type of Action
President	Ken J Laing II	4363 NW 90th Terrace	□Add
		Caral Springs, FL 33065	□Remove
Vice			Change
President	Kimberly Hue-Laing	4363 NW 90th Terrole	⊋Add
		Goral Springs, FL 33065	□Remove
			□Change
			□ Add
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: If the date inserted in this blo ment's effective date on the De	be specific and cannot be prior to date ck does not meet the applicable sta	of filing or more than 90 days aft atutory filing requirements, th	nis date wi	ill not be listed
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1 05 21	, 2023			
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Hin	The same of the sa	epresentative of a member		