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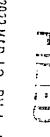
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COVER LETTER

Registration Section

TO:

Division of Cor	porations		
SUBJECT:Kax	<u> 19arss Sho</u> Name of Lin	pool of UC	
The enclosed Articles of .	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	<u>Jonathar</u>	Name of Person Shopping Firm Company	
	Kangaro	Shapping Firm Company	LLC
	7860 W.	Commercial Blue	2 ±930 EEE HA
	Lauderhill	City/State and Zip Code Ckangarashappi to be used for fidure annual report notifi	2023 HAR 13 PH I: 10 TALL AND SEE, FL Commission Co
	President (Rangarsoshoppio	cation)
For further information co	oncerning this matter, please c	all:	1.1
- Jonathan Name of	Dorda~	at (<u>466</u>) <u>480</u> Area Code Daytime	6147 Telephone Number
Enclosed is a check for th	e following amount:		
□ \$25.00 Filing Fee	\$1\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed?
Mailing Address Registration S Division of Co	ection orporations	Street Address: Registration Sec Division of Corp	ocrations
P.O. Box 632 Tallahassee, F		The Centre of Ta 2415 N. Monroe	illahassee Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>Kangaroo Shood</u> (<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on a Limited Liability Company)	our records.)			
The Articles of Organization for this Limited Liability C	Company were filed on $_$ 2	128/22	<u>)</u> aı	nd assig	ined
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lim	ited liability company here:				
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the design	nation "LLC" or the	abbreviati	ion "L.L.	<u>C."</u>
Enter new principal offices address, if applicable:			· ·	202	
(Principal office address MUST BE A STREET ADDR	RESS)		;==:: 	<u></u>	المتعد
				- -	Market 1
			: :2ల	ω	7
Enter new mailing address, if applicable:				PH	; #
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>		FA		
				<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our recor	rds, <u>enter the n</u> a	ame of th	<u>ie new j</u>	<u>registerec</u>
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·			
New Registered Office Address:					
	Enter Florida s	treet address			
	Cin.	, Florida .		Code	
	City		Zifr	coae	

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
MGR	Jasper Raindtree	7460 W. Commercial	□Add
		Landerhill, FL 33351	KRemove
			□Change
			□Remove
			☐ ☐ Change
			2023 and Remove
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If the date inserted in t	this block does no	it meet the appli	icable statutory fil	ing requirements, the	is date will not be list
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cord specifies a de	laved effective	e date, but n	ot an effective	e time, at 12:01	a.m. on the earli
90th day after the				., 	
Mass	α	9422			
March	<u> </u>	2027	<u>~</u> /		
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	Signature o	member or aut	horized representati	ve of a member	ζ; ω

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Filing Fee: \$25.00