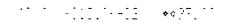
L23000138032

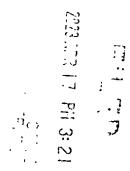
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Priorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400406452734





Y. SCOTT JUN - 6 2023

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: KEK	LRY AND DEE	W COLLECTION	UC_
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	ANDREW	S. EVINS Name of Person	
		Hallie of Felson	: : : : : : : : : : : : : : : : : : :
		Firm/Company	
	DA Pau	1-7887	~-1 + ~-n ~-0 , • 4
	NO 1204	Address	
	Á.a. 44m a	TI 20017	· 2
	URLANDO,	City/State and Zip Code	
	EVN CONSO E-mail address: (LTINGGROUPLLC to be used for future annual report noti	OGNAIL.COM
For further information e	oncerning this matter, please ca	ail:	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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)
<u>Mailing Addres</u>		<u>Street Address:</u>	
Registration S		Registration Sec	
Division of Corporations P.O. Box 6327		Division of Cor The Centre of T	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KERRY AND DREW CO	LECTION LLC	
(Name of the Limited Liability Compar (A Florida Limited L	iny as it now appears on our records.) Ciability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 22000/38 032.	were filed on $03/21/3022$ and ass	signed
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	U(1.00
The new name must be distinguishable and contain the words "Limited Liabili	lity Company," the designation "LLC" or the abbreviation "L.	===
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
	2	<u>.)} </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the ne</u>	<u>v registered</u>
Name of New Registered Agent:		<u>-</u>
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

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>	Name	Address	Type of Action
			□Add
			□Remove
			Change
			\ \ \ \ _Add
		· · ·	Remove
			Change Property Add
			<u>N</u> □Remove
			□Change
			□Add
			□Remove
		· · · · · · · · · · · · · · · · · · ·	□ Change
			□Add
			Remove
			Change
			🗆 Add
			□Remove
			□ Change

	<u>-</u> <u>-</u>		
			
		_	
		~	
		£623	
	· .	- <u> </u>	1 [
		<u>-</u> -	, -3
		Pï	,
		ယ္	
	· .	2	
		-	•
ective date, if other than the date of filing:	(optional)	
n effective date is listed, the date must be specific and cannot be prior to date of filing or rate: If the date inserted in this block does not meet the applicable statutory filing	nore than 90 days after filing ng requirements, this dat	g.) Pursua e will no	nt to 605.01 t be listed
cument's effective date on the Department of State's records.			
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m.	on the earlier of: (h) T	he 90th .	day after t
s filed.	on the carrier of. (b)	ne your	day diter t
red			
Signature of a member or authorized representative ANDREW J. EVINS Typed or printed name of signee			

Filing Fee: \$25.00