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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE TALLAHASSEE, FL

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## **COVER LETTER**

TO:	Registration Se Division of Co			
C118211	ECT:	k	COA LLC	
SOBU		Name of Lin	nited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		A	NDERSON KLETTEMBER	RG
			Name of Person	
			KOA LLC	
		<del></del>	Firm/Company	····
			5258 WILLOW CT	
			Address	<del>-</del>
			ORLANDO FL 32811	
			City/State and Zip Code	***
	IL.COM			
For fur	ther information c	e-mail address: (	to be used for future annual repail:	oort notification)
	JULIANA	the state of the s	321	436-5110
		f Person	at ()	Daytime Telephone Number
		he following amount:		
<b>■</b> S2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:		Street Add		
	Registration S		<del>_</del>	on Section
	Division of C P.O. Box 632	•		of Corporations re of Tallahassee
	Tallahassee, I			Aonroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	KOA LLO			
(Name of the Limi	ited Liability Compar	iv as it now appears of iability Company)	n our records.)	
	(A Florida Limited L	iaomity Company)		
The Articles of Organization for this Limited L		were filed on	04/14/2022	and assigned
Florida document numberL22000180257				
This amendment is submitted to amend the fol				
A. If amending name, enter the new name of	of the limited liabi	lity company here:	:	
NONE				
The new name must be distinguishable and contain the	words "Limited Liabili	ty Company," the desig	gnation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if appli-	cable:	NONE		
(Principal office address MUST BE A STREE	ET ADDRESS)			···
Enter new mailing address, if applicable:		NONE		
(Mailing address MAY BE A POST OFFICE BOX)				202 SE
				Z SI
			<del></del> -	SE P
B. If amending the registered agent and/or	registered office a	ddress on our reco	rds, <u>enter the nam</u>	e of the new recentered
agent and/or the new registered office addre	ess here:			SSE
	NOME			ANII: OF ST SSEE,
Name of New Registered Agent:	NONE			<del>- 7</del> 4 <del>- 3</del>
New Registered Office Address:	NONE			m
- <del></del>		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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	OBERDAN MIRANDA ARAUJO	5258 WILLOW CT	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		ORLANDO FL 32911	\exists Remove
			□Change
			□AdJ
			□Remove
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			□Add
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	REMOVE SOCIO OBERDAN MIRANDA ARAUJO
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Effecti	ve date, if other than the date of filing: (optional)
lf an effe	ctive 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
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
(N)C (III)	and serrective date on the Department of State's records.
e 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
rd is fil	Cd.
Dated .	09/06 2002
	L'ence
	Signature of a member or authorized representative of a member
	<b>)</b>
	ANDERSON KLETTEM BERG

Filing Fee: \$25.00