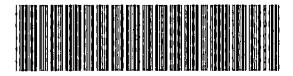
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SECRETARY OF STATE

2022 NOV -3 AHTT: 0

## **COVER LETTER**

TO: Registration Section Division of Corporations			
KB art &			
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub-	nitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	Kristopher Gonzalez		
	-	Name of Person	
	K&B Group Holdings, LLC	C	
	<del></del>	Firm/Company	
	3008 Meleto Blvd		
		Address	
	New Smyrna Beach, FL	32168	
	funds.staff@gmail.com	City/State and Zip Code	
	<del></del>	o be used for future annual report notification)	
For further information	concerning this matter, please ca	ali:	
Kristopher Gonzalez		201 218-2578 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 & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 27	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**

KB art & film LLC	
(Name of the Limited Liability Compan (A Florida Limited Lia	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company w	vere filed on May 4, 2022 and assigned
Florida document number L22000211369	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
K&B Group Holdings, LLC	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	NGU SMYRNA BEACH FL 32168
(Principal office address MUST BE A STREET ADDRESS)	NEW SMYRNA BEACH FL 32168
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same as Above  FALLAHA  TALLAHA
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	Idress on our records, enter the name of the new registered
Name of New Registered Agent:	TORION D.S. TATE
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zıp 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>	Address	Type of Action
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			□ Remove
			[] Change
			□Add
			□Remove
			□Change
			□Add
			🗀 Remove
			Change
			🗆 Add
			□Remove
			□Change
	<del>-</del>	□Remove	
	~~~~		□Add
			□Remove
			□Change

D. If ameno	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note: If	date, if other than the date of filing:  (optional)  ive 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)(but the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the t's effective date on the Department of State's records.
If the record s record is filed	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
Dated _	October 20th 2022
	Signature of a member or authorized representative of a member
	Kristopher A. Gonzalez Breanne Vible C Typed or printed name of signee

Filing Fee: \$25.00