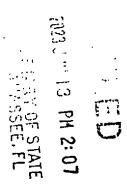
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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R. HUNT 06/13/23

## **COVER LETTER**

TO: Registration : Division of C			
SUBJECT:	Kenferbizald	pal LIC	
SUBJECT:	Name of Lim	ited Liability Company	· <del></del>
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	henfer st	Rose. Name of Person	<del></del> _
	Kenferbizgloba		
	4813 River Viel	ta Ln Apt A	7. 13 2. 13
	Tampa	Address FL 3367	13 PH 2: 07
		City/State and Zip Code  Kenfer bi Z - com  to be used for future annual report notific	• • •
For further information	concerning this matter, please ca		auton)
Kenfer St	Rose		0037
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 & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addr</u> Registration		<u>Street Address:</u> Registration Sect	ion

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kenferbiz Academy & Consulting LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability	Company v	vere filed on <u>May 5 202</u>	22 = and assigned
Florida document number <u>L. 2.200214264</u>	·	•	المان الم
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liabil	ity company here:	PH
Kerfer bizalobal LLC The new name must be distinguishable and contain the words "Lin	imited Liabilit	y Company." the designation "LLC" o	ir the differentiation "L.L.C."
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADD	ORESS)	4813 River Vista	<del></del>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		Tampa FL 3361  b421 N Florida  Tampa FL 3366	. Ave b-477
B. If amending the registered agent and/or registered agent and/or the new registered office address here:		ldress on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent: Ke	nfer	et Rosc	
New Registered Office Address:	13 Rive	Enter Florida street address	· A
To	amiga	, Flori	ida 33617

## 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.

Cuy

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 Tank FL	Type of Action
MGR	Kenfer St Rose	Hall River viola Ln Apt A 33617	🗹 Add
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			□Change
			🗆 Add
			🗆 Remove
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Note: If the	e date inser	er than the I, the date must ted in this blo ate on the De	ck does not i	meet the ap	plicable sta	f tiling or more tutory filing i	than 90 days equirement	optional) s after filing. s, this date	) Pursuant will not b	to 605.0207 e listed as
record spe d is filed.	cifies a dela	ayed effective	date, but no	t an effecti	ve time, at 1	2:01 a.m. on	the earlier o	of: (b) Th	e 90th day	after the
Dated	oune	1 <sup>34</sup>		202	3					
			Pas.	<del>}_</del>						
_			Signature of a	member or a	authorized re	presentative of	a member			