## L Z Z O O O Z 4 Z 5 8 6

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Bosiness Eliki, Harre)
(Document Number)
(Bocament Namber)
Contilled Cooler Contilled to a Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000410044740

CE/12/20--010:4--U20 ••35.00





## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Co	rporations			
SUBJECT: KW	made Nurri Name of Lin	S ENTERPRISE	LLC	
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please return all correspondent	ondence concerning this matter	r to the following:		
	Kwmane 1	Name of Person	·	
	Kwmane r	LORPIC ENTERPY	cise	Y
	7707 No-	ttinghill sky i	Drive	7973
	Apollo Bead	City/State and Zip Code	Social English	12 PM 7: 06
	E-mail address: (	to be used for future annual report noti-	fication T	rate
For further information of	oncerning this matter, please c	all:		
Kwmare 1 Name o	lorrir f Person	at (813) 174 Area Code Daytime	- <b>* 80</b> e Telephone Number	<del></del> -
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 F Certificate of S Certified Copy (additional copy is	Status &
<u>Mailing Addres</u> Registration S		Street Address: Registration Sec	rtion	
Division of C		Division of Con		
P.O. Box 632		The Centre of T		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kumane Nuevas Enterprise

(A)	Florida Limited Li	ability Company)	on our records.)				
The Articles of Organization for this Limited Liability Company were filed on 05-25-2022 and assigned Florida document number 22000242586.  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC" or the abbreviation "LLC" or the abbreviation "LLC".  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here:  Name of New Registered Agent:  Carly Cabbert  New Registered Office Address:  2424 W. Brandon Blvd #1520							
This amendment is submitted to amend the following	ng:						
A. If amending name, enter the new name of the	e limited liabil	ity company here	.*				
The new name must be distinguishable and contain the words	s "Limited Liabilit	y Company," the desi	gnation "LLC" or th	ie abbrevi	ation "L	.L.C."	~
Enter new principal offices address, if applicable	e:				(, , <u>+-</u>	·	
(Principal office address MUST BE A STREET A	(DDRESS)				2	 	_
			<del>-</del>	<u> </u>	P	월 5 월 	_
Enter new mailing address, if applicable:				STATE E, FL	7: 06		_
Mailing address MAY BE A POST OFFICE BO	<u>X)</u>						_
B. If amending the registered agent and/or regis	stered office ad ere:	idress on our reco	ords, <u>enter the n</u>	ame of	the nev	w regist	ered
Name of New Registered Agent:	Carly	Cobbert		· · · ·		_	_
New Registered Office Address:	2424	W. Brad Enter Florida	street address	4	£152	10	
	Brand	ON	, Florida		io Code		_
Naw Dagirtarad Agent's Signature if shanging Pagi	stored Agent:	N_ 14 T		Zi	w coae		

New Registered Agent's Signature, il 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	<u>Address</u>	Type of Action
VP_	Carly Colobert	2424 W. Brandon B	IV d □Add
		#1520 Brandon, Fl	_33511 □ Remove
			DChange
			□Remove
			☐ Change
<del></del>			PAGE TO Add
			2 PH Remove Change
			Change
			□Add
			Remove
			□Add
			[] Change
			∃Add
			□Remove

							_
				<u> </u>			_
					_		-
<del></del>		<del></del>		<del></del> -			
							_
		<del></del>		<u> </u>	-		_
		<del> </del>	<del></del>			<u> </u>	_
						~	_
					:. <u> </u>	3 4.5	
			<del></del>		<u> </u>		<u>.</u>
<del></del>		<del></del>		<u> </u>	天皇	- CT	7
·					SSE	PH []	ii neg
					Line Spirit	٠ <u>.</u>	
			<del></del> ,,	<del> </del>	THE THE	8-	-
<del></del>	<del></del>						_
				· <b>-</b>		_	
			<u> </u>	<del></del>	·		-
	<u> </u>						_
Tective date, if other than effective date is listed, the	han the date of fi date must be specific	iling: c and cannot be prio	r to date of filing or	(0)	ptional) fter filing \ P	ureumt to 60	5 A.
ote: If the date inserted in current's effective date of	n this block does n	not meet the applic	cable statutory fili	ng requirements.	this date w	II not be list	teá
Surface Surface Country Countr	in the isepartment	of state s records	<b>).</b>				
ecord specifies a delayed	effective date, but	not an effective t	ime at 12·01 a.m.	on the earlier of	(h) The G	Outh day afte	ar sl
is filed.	.,		2	on mo damer or	. (0)	our day and	,1 LI
ited			·				
-		~ <u>`</u>					
W2							