## LZZ 000323741

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2022 AUG 11 PM 3: 21

## **COVER LETTER**

Tallahassee, FL 32314

TO:

| ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 |                                                  |                                        |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------------------------|----------------------------------------|--|
| SUBJECT: KA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | LLEN RYAN                       | I LLC:                                           | •                                      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 |                                                  |                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 |                                                  |                                        |  |
| The enclosed Articles of A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Amendment and fee(s) are sub    | mitted for filing.                               |                                        |  |
| Please return all correspor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | idence concerning this matter   | to the following:                                |                                        |  |
| Division of Corporations  UBJECT: KALLEN RYAN LLC Name of Limited Liability Company  the enclosed Articles of Amendment and fee(s) are submitted for filing.  lease return all correspondence concerning this matter to the following:  Kallen Leeseberg Name of Person  KALLEN RYAN LLC Firm/Company  8660 K: Kenry Cowt Address  Fort Myers FL 33912  Einstall address: (to be used for future annual report notification)  or further information concerning this matter, please call:  Kallen Leeseberg Name of Person  at (706) 564-0513  Area Code  Daytime Telephone Number |                                 |                                                  |                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | KALLE                           | N RYAN LLC Firm/Company                          |                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 8660                            | Kilkenry Cowt                                    |                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Fort 1                          | Ny avs FL 339<br>Eity/State and Zip Code         | 12                                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | K. lees<br>E-mail address: (1   | to be used for future annual report noti         | GM<br>fication)                        |  |
| For further information co                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ncerning this matter, please ca | all:                                             |                                        |  |
| Kallen Lee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | esebers<br>Person               | at ( <u>786)</u> <u>564-</u><br>Area Code Daytim | o S13 e Telephone Number               |  |
| Enclosed is a check for the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | e following amount:             |                                                  |                                        |  |
| □ \$25.00 Filing Fee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 | Certified Copy                                   | Certificate of Status & Certified Copy |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 |                                                  |                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 | •                                                |                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | -                               |                                                  | •                                      |  |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

| KALLEN RY                                                                                                  | YAN LLC 2022 AUG 11 PM 3: 25                                                  |
|------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| ( <u>Name of the Limited Liabili</u><br>(A Florida                                                         | ty Company as it now appears on our records TALLAHASSEE, FL                   |
| The Articles of Organization for this Limited Liability C. Florida document number <u>L22000 323 741</u>   | Company were filed on July 21, 2022 and assigned                              |
| This amendment is submitted to amend the following:                                                        |                                                                               |
| A. If amending name, enter the new name of the limit                                                       | ited liability company here:                                                  |
| The new name must be distinguishable and contain the words "Lim                                            | ited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:                                                        | RESS) FOCH MYES, FL 33912                                                     |
| (Principal office address MUST BE A STREET ADDR                                                            | RESS) for Myers, fl 33912                                                     |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)                      | 3660 Kilkenny Cowt<br>Fort Myers, FL 33912                                    |
| B. If amending the registered agent and/or registered agent and/or the new registered office address here: | d office address on our records, enter the name of the new registered         |
| Name of New Registered Agent:                                                                              |                                                                               |
| New Registered Office Address:                                                                             | 8660 Kil Kenny Cowt  Enter Florida street address                             |
| <u>fo</u>                                                                                                  | City Florida 33912  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 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 |
|--------------|---------------------------------------|----------------|----------------|
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| If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)                                                                           | - ′                  |              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------------|
| The only Changes that need to be greended                                                                                                                                   | is the               | _            |
| principal address and Mailing address                                                                                                                                       | for                  | _            |
| KALLEN RYANGLC. The address the                                                                                                                                             |                      | _            |
| originally filed contained a typo. I wo                                                                                                                                     |                      |              |
| the correct address to be entered. The                                                                                                                                      | C3((0+               | _            |
| principal and Mailing address for                                                                                                                                           | <u> </u>             | -            |
| KALLEN RYAN LLC Should be                                                                                                                                                   |                      | _            |
| THECCIVE MILLS DE                                                                                                                                                           | <del>.</del>         | -            |
| 8660 Kilkana C a                                                                                                                                                            | <del></del>          | <del>-</del> |
| 6660 Kilkenny Court<br>Fort Myers, FL 33912                                                                                                                                 | · <del>-</del>       | -            |
| rol+ Myers, PL 33912                                                                                                                                                        | 2022                 | -            |
|                                                                                                                                                                             | ALL ALG              | -"           |
|                                                                                                                                                                             | <u> </u>             | - B          |
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|                                                                                                                                                                             |                      |              |
| Effective date, if other than the date of filing: (option of the date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after |                      | 5.0207 (     |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.   | date will not be lis | ted as t     |
|                                                                                                                                                                             |                      |              |
| record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b. d is filed.                                                      | ) The 90th day after | er the       |
| Dated 8 17122                                                                                                                                                               |                      |              |
| Signature of a member or authorized representative of a member                                                                                                              |                      |              |
| Signature of a member or authorized representative of a member                                                                                                              |                      |              |
| Typed or printed name of signee                                                                                                                                             |                      |              |