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(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
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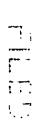
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A. RIVERS JAN - 9 2023



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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Kromahfit Cafe USA LCC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Allan D Millington Name of Person
Kromahfit Cafe USA LLC
11425 Red Jade C+
City/State and Zip Code  all an m 23 @ g mail, Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Allan Millington at 240, 595-1995  Name of Person 9  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status  □ \$55.00 Filing Fee Certificate of Status  □ \$55.00 Filing Fee Certificate of Status  □ \$60.00 Filing Fee,  □

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

Kramabfit Cafe USA 110

Name of the Limited Liability	Company as it now appears on our records.) imited Liability Company)		
The Articles of Organization for this Limited Liability Con Florida document number 12200397050	mpany were filed on 9-12-203	and ass	igned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the	e abbreviation "L.	IC."
Enter new principal offices address, if applicable:			<del></del>
(Principal office address MUST BE A STREET ADDRE	<u></u>		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered of	office address on our records, enter the 1	name of the nev	v registere
agent and/or the new registered office address here:  Name of New Registered Agent:			
New Registered Office Address:		7A S	
NOW TRESIDENCE OTTHE TRANSPORT	Enter Florida street address , Florida	22 OCT	1 ;
	City	Code Zip Code	1
New Registered Agent's Signature, if changing Registered	Agent:		IT:
I hereby accept the appointment as registered agent ar	nd agree to act in this capacity. I further	agree to comp	oly with th

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>	Name	Address	Type of Action
mgr	Allan D Haislay	11425 Red Tade Ct	□Add
	,	Upper malboro, mD 20	74 Decemove
		Wrong last name	to Change
mGR	Allan D Millington	11425 Red Jade Ct	C[Ada
		Upper Mariboro, MD 207	<u> </u>
		correct last name	□Change
	· · · · · · · · · · · · · · · · · · ·		□Add
			□Remove
			□Change
	***		□Add
			Remove
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<del></del>			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change

Effective date, if other than the date of filing:  (optional)  If an effective 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 document's effective date on the Department of State's records.  The 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 rid is filted.  Dated October 13, 2024  Signifure of a member or authorized representative of a member		
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