

L220004BDS91

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

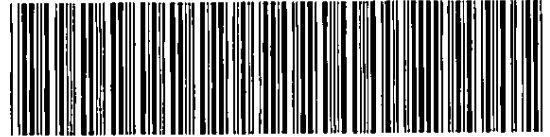
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED

2023 MAR 21 AM 10:46

CLERK OF STATE
TALLAHASSEE, FL

RECEIVED

2023 MAR 21 AM 11:32

ALLAHASSEE, FL

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 1600649 7462880

AUTHORIZATION : 

COST LIMIT : \$ 25.00

ORDER DATE : March 21, 2023

ORDER TIME : 9:36 AM

ORDER NO. : 600649-005

CUSTOMER NO: 7462880

DOMESTIC AMENDMENT FILING

NAME: CRIMMINS WEALTH MANAGEMENT LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER'S INITIALS: _____

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

2023 MAR 21 AM 10:46

CRIMMINS WEALTH MANAGEMENT LLC

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

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 10/05/2022 and assigned
Florida document number L22000430591.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

KJE LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

8429 Lorraine Road, Suite 111

(Principal office address MUST BE A STREET ADDRESS)

Lakewood Ranch, FL 34202

Enter new mailing address, if applicable:

8429 Lorraine Road, Suite 111

(Mailing address MAY BE A POST OFFICE BOX)

Lakewood Ranch, FL 34202

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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 Changing Registered Agent, Signature of New Registered Agent

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2023 MAR 21 AH 10:40
CLERK OF STATE
TALLAHASSEE, FL

2023 MAR 21 AH10:46
FLORIDA DEPT. OF STATE
TALLAHASSEE, FL

E. 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 record is filed.

Dated March 20, 2023

Daniel Cunniff

Signature of a member or authorized representative of a member

Daniel Crimmins

Typed or printed name of signee

Filing Fee: \$25.00