## L22000458732

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Office Use Only



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LLC Amend



A. RAMSEY

AUG - 2-2023

## **COVER LETTER**

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.;	Knights In M	otion 🦸	Enight.	s in Aloti	ion Cli	O .	
SUBJECT:			Name of Limit	ed Liability Company			
The enclose	d Articles of A	mendment and	fee(s) are subm	nitted for filing.			
Please return	n all correspon	dence concernir	ng this matter to	o the following:			
		Adriana Quin	tana Martinez				
				Name of Persor	1	<del></del>	
		Knights In M	otion LLC				
				Firm/Company			
		17952 NW 63	Brd Ave				
		<del></del>		Address			
		Hialeah, Fl 3.	3015				
		Knightsinmoti	onllc@gmail.co	City/State and Zip Com	'ode		
		F;-	mail address: (to	be used for future an	nual report notifie	cation)	
For further i	ntormation cor	ncerning this ma	itter, please cal	1:			
Adriana Qui	ntana Martinez			305	303-8506		
	Name of I	Person		at (at Code	Daytime	Telephone Number	
Enclosed is a	a check for the	following amo	int:				
□ \$25.00 I	Filing Fee	S30.00 Fili Certificate	ng Fee & e of Status	□ \$55.00 Filing Certified Cop (additional copy	y.	Certified C	of Status &

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

FILED

Knights In Motion LLC

2023 JUN 30 PM 1:37

(Name of the Limited Liability Company as it now appears on our records.) 1-33 1 2 5 7 (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_\_ and assigned Florida document number \_\_\_\_\_1.22000458732 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/AEnter 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 registered agent and/or the new registered office address here: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address \_\_\_\_. Florida \_\_\_

## 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>	Name	Address	Type of Action
MGR	Sergio Velazquez	17952 NW 63rd Court	
		Hialeah, Fl 33015	
			□Change
N/A			□Add
			□Remove
<b>N</b> 1/4			□Change
N/A			
			□Remove
27/2			□Change
N/A			
			□Remove
N/A			□Change
			□Add
			□Remove
N/A			□Change
			☐Add
			□Remove

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	01/01/2023	
	st be specific and cannot be prior to date of fili lock does not meet the applicable statuto	( <b>optional</b> ) ing or more than 90 days after filing.) Pursuant to 605.0207 (3) ry filing requirements, this date will not be listed as the
e record specifies a delayed effectived is filed.	e date, but not an effective time, at 12:0	l a.m. on the earlier of: (b) The 90th day after the
May 29	2023	
Dated		-7 //
	12	,
	Signature of a member or authorized epreso	untativa at'a mumbar