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Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	
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SECRETARY OF STATE TALLAHASSEE, FI

TILED

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COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT: K	F TECHNO Name of Limi	LOGIES Lited Liability Company	C.C	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspor	ndence concerning this matter	to the following:		
	Joses	BOVING Name of Person		
	Bovino	CAW Group	P.A.	
	1504	BAY Rd.	# 901	
	Minn.	BEACH FL City/State and Zip Code bovino lawge	33139	
	Joe 4	to be used for future annual	seport politication	
For further information co	oncerning this matter, please ea		терит постепни	
Joseph Nume of	Bavino	at (30)	Y 2 5 - 9 9 3 Daytime Telephon	e Number
Enclosed is a check for the	e following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is end	:losed)	560.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

KMF TECHNOLUGI	-		
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on ou ability Company)	ir records.)	
The Articles of Organization for this Limited Liability Company of Florida document number	were filed on	6/2022	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
KMF TECHNOLOGIES The new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the words "Limited Liability or the new name must be distinguishable and contain the new name must be distinguishable and contain the new name of the new name	LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designat	ion "LLC" or the abb	oreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>	
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:		SECRETARY TALLAHA	FI FI
(Mailing address MAY BE A POST OFFICE BOX)		SSEE, FL	PH C
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our record	s, <u>enter the name</u>	e aprine new registered
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:	Enter Florida str	cet 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

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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
			□Change
			ElRemove
			🗀 Change
			□Add
			□Remove
			□Change
			□ Add
			[]Remove
			□Change
			□ Remove
			□ Change

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effective e: If th ument's	date, if other than the date of filing:
ed	June 9, 2023.
	Signifure of a member or authorized representative of a member
	Toseph Bovino Typed or printed name of signee

Filing Fee: \$25.00