Florida Department of State

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Account Number : I20060000135

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: (305)789-3200

Fax Number

: (305)789-4137

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: dyoung@kbd-consulting.com

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T. LHeipEUX

AUG 15 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KBD Consulting, LLC				
(Name of the Lim	(A Florida Limit	npagy so it now appear ed Labinty Company).	t on our records.)	
The Articles of Organization for this Limited I Florida document number L22000500237		iny were filed on No	vember 28, 2022	and assigned
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited li	ability company be	<u>re</u> :	
N/A		•		
The new name must be distinguishable and contain the	words "Limited Li	ability Company," the de	signation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		N/A		
Principal office address MUST BE A STRE	ET'ADDRESS)	,		
			***	•
Enter new mailing address, if applicable:		N/A		·
Mailing uddress MAY BEA POST OFFICE	BOX)		A P 200 MILE A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
				.283
B. If amending the registered agent and/or	registered offic	e address on our re	cords, enter the nam	e of the new registered
agent and/or the new registered office addre	ss nere:			
at âs m la la	N/A			= -
Name of New Registered Agent			 	
New Registered Office Address:		The second secon	du street address	
		Enter Flori	da sireet address	
		Cirv	, Florida	Tio Code
Man a Marilde in a D. Ammada Drimadina & With an interni	The alicentes is along	•		ZIP Coas
New Registered Agent's Signature, If changing				
I hereby accept the appointment as registere provisions of all statutes relative to the propaccept the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this	er and comple istered agent a registered offic	te performance of i s provided for in Ci	ny duties, and Lam fo hapter 605, F.S. Or,	amiliar with and if this document is
	ii Ch	anging Registered Age	it, Signature of New Reg	istered 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

Title	<u>Name</u>	Address	Type of Action
VP	Mirka Young	3621 Granada Blvd	
		Coral Gables, FL 33134	Remove
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ctive date, if other than the	t be specific and cannot b	e prior to date of filing	or more than 90 day	s after filing.) Pursuant to	605,6
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