# Lagooof 27/

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Division of Corporations

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Account Number : I20090000081

: (307)200-2803

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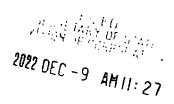
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# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **K&P RENTALS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

DEC 12 2022 A. LUNT

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



### **K&P RENTALS LLC**

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

The Articles of Organization for this Limited Liability Company	were filed on 12/05/22	and assigned
Florida document number L22000511271		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or t	he abbreviation "L.I.,C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new registered
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 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
MGR	BANNIS, KAREN	7901 4TH ST N STE 300	□Add
		ST. PETERSBURG, FL 33702	⊠Remove
			□ Change
MGR	Payne, Kevin	7901 4TH ST N STE 300	ZAdd
		ST. PETERSBURG, FL 33702	□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
**************************************			□Add
			□Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) H. J. Comp. 2022 DEC -9 AMII: 27 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 December 9 2022 Signature of a member or authorized representative of a member Riley Park Typed or printed name of signee

. . . .

Filing Fee: \$25.00