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To: Division of Corporations Fax Number : (859)617-6383 From: Account Name : LEGALZOOM.COM INC. Account Number : I20010000852 : (323)962-8600 Fax Number : (323)389-0502  $\mathbb{R}^{k+1}$ Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* Email Address:\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN QAMEA KAVA LLC

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Corporate Filing Menu

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## **COVER LETTER**

TO: Registration S Division of Co					
QAMEA I	KAVA LLC				
SUBJECT:	Name of Lin	nited Liability Company	<del></del>		
	Mike Town				
	Berline berline our survey.	Name of Person			
	Legalzoom.com, Inc.				
	<del></del>	Finn/Company			
	9900 Spectrum Dr			<b>202</b>	
		Address	<del></del>		<b>-</b> n
	Austin, TX 78717			UL 2 ETAF	-
		City/State and Zip Code		7338 10 A	m
	Name of Limited Liability Company  ss of Amendment and fee(s) are submitted for filling.  respondence concerning this matter to the following:  Mike Town  Name of Person  Legalzoom.com, Inc.  Firm/Company  9900 Spectrum Dr  Address  Austin, TX 78717  City/State and Zip Code  austinstein@qameakava.com  E-mail address: (to be used for future annual report notification)  on concerning this matter, please call:  TO Daytime Telephone Number  For the following amount:				
For further information of	concerning this matter, please c	alt:		RID!	
Mike Town					
Name o	of Person	Area Code Daylin	ie Telephone Number	_	
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	Cenified Copy	Certificate of S Certified Copy	Status &	
	ING ADDRESS:	STREET/COUR Registration Section			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, F1, 32301 To:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were f Florida document number L22000520797	iled on 12/12/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	mpany bere:
The new name must be distinguishable and contain the words "Limited Liability Cont	pany," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	70 20 20 20 20 20 20 20 20 20 20 20 20 20
	<u> </u>
	L 29 NASSI
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	: <u>;                                    </u>
<del></del>	
n te di	Çm <b>v</b>
B. If amending the registered agent and/or registered office acresistered agent and/or the new registered office address here:	laress on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	Zip Code

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

rage loci

To:

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	Name	Address	Type of Action
AMBR	Austin Stein	525 Eastwood Place Pensacola, FL 32514	
			C Remove
			Change
AMBR	HAILEY LOEHRER		Add
		525 EASTWOOD PL. PENSACOLA, FL 32514	■ Remove
			- Change 20
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(If an efficience docum	ive date, if other than the date of filing:	d as the	)
	25th July 2024. Lustin Stein		
Dated	, ,		
Dated	Signature of a member or multiorized representative of a member		
Dated	Signature of a member or authorized representative of a member  Austin Stein		

Page 3 of 3

Filing Fee: \$25.00