## L22000535320

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TO: Registration So Division of Co			•		
41 T T T T T T T T T T T T T T T T T T T	HOLDINGS LLC		**,		
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Roy Ribot				
		Name of Person			
	Ribot Business Solutions				
	<del></del>	Firm/Company			
	28 W Flagler St Ste 1200D				
		Address			
	Miami, Fl., 33130				
	roy@ribotsolutions.com	City/State and Zip Code			
		to be used for future annual report no	tification)		
For further information of	concerning this matter, please ca	all:			
Roy Ribot		786 906-0053			
Name o	of Person	at () Area Code Dayti	me Telephone Number		
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed)		
Mailing Addre		Street Address: Registration S	ection		
Registration Section Division of Corporations		Division of Corporations			

P.O. Box 6327 Tallahassee, FL 32314 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

KRUNCH HOLDINGS 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 12/22/2022 and assigned Florida document number L22000535320 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: KEBO CORNER LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

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II amen, 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
AMBR	FRANCISCO E LARA URDANET	200 CRANDON BLVD SUITE 110	□ Add
		KEY BISCAYNE, FL 33149	■Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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. If amending any other infor	mation, enter chang	ge(s) here: <i>(Au</i>	tach additional s	heets, if necesse	ary.)
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Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in thi document's effective date on the	must be specific and cann s block does not meet t	the applicable st	of filing or more that atutory filing requ	(options an 90 days after fili airements, this da	ng.) Pursuant to 605.020
he record specifies a delayed effe ord is filed.	ctive date, but not an e	effective time, at	12:01 a.m. on the	e earlier of: (b)	The 90th day after the
Dated					
	hase Caste	lland			
	Signature of a memb	ber or authorized i	representative of a n	nember	
Jose Castellano / DA	AVEDAN ASSOCIAT	ES LLC			
	Typ	ed or printed nam	e of signee		

Filing Fee: \$25.00