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SECRETARY OF STAIR

A. RIVERS MAY 3 0 2023

COVER LETTER

	tration Sec on of Corp			
	& S Subs	Thornton, LLC		
SUBJECT: _		Name of Lim	ited Liability Company	····
The enclosed A	articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return al	l correspor	ndence concerning this matter	to the following:	
		J. Breck Brannen		
			Name of Person	
		Pennington, P. A.		
			Firm/Company	
		215 S. Monroe; Suite 200		
			Address	·
		Tallahassee, FL 32301		
			City/State and Zip Code	
		breck@penningtonlaw.com		
		E-mail address: (to be used for future annual report n	otification)
For further info	rmation co	ncerning this matter, please ca	all:	
Alan Shanamar	า		248 220-3320 at (
	Name of	Person		ime Telephone Number
Enclosed is a cl	neck for the	e following amount:		
≡ \$25.00 Fili:	ng 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)
	g Address		Street Address:	
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	Box 6327	-	The Centre of	•
Tallal	hassee, F	L 32314	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

K & A Subs Thornton, 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 March 6. 2023 and assigned Florida document number L23000117551 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: K & A Subs Lithia Springs, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.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 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 Florida City

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

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
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Filing Fee: \$25.00