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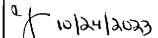


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2023 CCT 1 6 AM 7: 57

Office Use Only



COVER LETTER

TO:

TO: Registration S Division of Co			•.
	NGELS LIMITED LIABILIT	V COMBANIV	
SUBJECT: KV & 1 A		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	TALESIA S LAWES		
		Name of Person	
	KV & T ANGELS, LIMI	TED LIABILITY COMPANY	
		Firm/Company	
	6129 HIALEAH STREET		
		Address	
	ORLANDO,FLORIDA 31	2808	
		City/State and Zip Code	
	info@kvnt.com		
For further information of	concerning this matter, please c	to be used for future annual report no all:	tification)
Talesia Lawnes		at (786) 5019959	
Name o	of Person		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	ss:	Street Address:	
Registration Section		Registration Se	
Division of Corporations P.O. Box 6327		Division of Co The Centre of	-
Tallahassee,			oe Street, Suite 810
rununussee, r. z. ses i T		Tallahassee F	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KV & TANGELS LLC

KV&T ANGELS, LIMITED LIABILITY COMPANY

2023 OCT 16 AM 7: 52

(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 $\frac{03/14/2023}{1}$ and assigned Florida document number 1.23000131844 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 6129 Hialeah street Enter new principal offices address, if applicable: Orlando, FLORIDA, 32808 (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: Talesia S Lawnes Name of New Registered Agent:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

6129 Hialeah street

Orlando

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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>	<u>Name</u>	Address	Type of Action
MGR	Venesca L Thompson	6129 Hialeah street, Orlando, Florida 32808	■ Add
			□Remove
			□Change
MGR	Kimalo R Brown	6129 Hialeah street. Orlando, Florida, 32808	
			■Remove
			□Change
MGR	Talesia S Lawes	6129 Hialeah street, Orlando, Florida, 32808	= Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□ Change

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Note: 11	e date, if other than the date of filing:
the record cord is filed	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 l.
Dated 1	0/09/2023
	Mawes
	Signature of a member or authorized representative of a member
	Talesia S Lawes
	Typed or printed name of signee