## L23000113545

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## **COVER LETTER**

T <sub>i</sub> O: Registration S Division of Co			
SUBJECT: KILO,LLO	•		
<u></u>		mited Liability Company	••
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	Michael Lynch	Name of Person	
		Firm/Company	
	1039 Westbury Way	Address	
	Heathrow, FL. 32746		
	m_e_Lynch@hotmail.com	City/State and Zip Code	
For further information c		to be used for future annual report not	iffication)
Michael Lynch Name o	r Person	at (512 ) 970-2713   Daytin	ne Telephone Number
Enclosed is a check for th	c following amount:		
■ \$25.00 Filing Fee	(1) \$30.00 Filing Fee & Certificate of Status	C1 \$55.00 Filing Fee & Certified Copy fadditional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro	porations

Tallahassec, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION JUNI 16 AM 8: 34

KILO, LLC

(Name of the Limited Liability Company as it now appears on

Y <del>ISAN WINE IM</del>	(A Florida Limited Liability Compan	iy)
The Articles of Organization for this Limited Florida document number L23000173595	Liability Company were tiled on	April 12, 2023 and assigned
This amendment is submitted to amend the following	llowing:	
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," th	te designation "LLC" or the abbreviation "L.L.C"
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	BOX)	
		· · · · · ·
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on our	records, enter the name of the new registered
agent and/or the new registered office addre	ess nere:	
Name of New Registered Agent:	Michael Lynch	
		- <del></del> -
New Registered Office Address:	1039 Westbury Way  Enter F	
	ricainfow Civ	Florida 32746 Zip Code
New Registered Agent's Signature, if changing		z.p Coae
	ed agent and agree to act in this wer and complete performance of stered agent as provided for in registered office address, I hen	Chapter 605, F.S. Or, if this document is
	/ MICHAEL	Lynch .

fic nanging Registered Agent, Signature of New Registered Agent

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_	Katrina Walton	<del></del>	
		1550 S. Jefferson St. Monticello, Fl. 32344	■Remove
MGR .	Michael Lynch	1039 Westbury Way, Heathrow, FL. 32746	≣Add
		<del></del>	□Remove
			□Change
MGR	Yangsu Ren	8590 Ferndale Street, San Diego, CA 92126	
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			□Remove
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to the date i	other than the da listed, the date must be nserted in this block we date on the Depa	s does not meet the	applicable statuto	ing or more than 90 da ry filing requiremen	(optional)  ays after filing.) Pursuant to  nts, this date will not be	605,0207 ( listed as t
managed are 140	delayed effective da	ate, but not an effec	tive time, at 12:0	l a.m. on the earlie	r of: (b) The 90th day :	after the
record specifies a l is filed.						
i is meu.	6/16/23	, -				
a is oieu.	6/10/23	Mic IIAc	L LYNCH	entative of a member	·	
a is oieu.	6/16/23		C LYNCH or Authorized represent LYNC			

Filing Fee: \$25.00