## L23000199025

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## **COVER LETTER**

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SHULLCT	K2 TECH				
SUBJECT	:		nited Liability Company	<del></del>	
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please retur	n all correspo	ondence concerning this matter	to the following:		
		David Roberts			
			Name of Person		
		Registered Agents Inc			
			Firm/Company	<del></del>	
		7901 4th St N, STE 4000			
		Address St. Petersburg, FL 33702			
		City/State and Zip Code			
	Frank, Garcia 305@gmail.com				
		E-mail address: (	to be used for future annual report notif	ication)	
For further i	information e	oncerning this matter, please c	all:		
Frank Garei	ia		305 323-9790 at ( )		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed is	a check for th	ne following amount:			
<b>■</b> \$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)	
			-		
	iling Addres		Street Address:		
	gistration S		Registration Sec		
		orporations -	Division of Corp		
	D. Box 632		The Centre of Ta		
Ta	Hahassee, F	L 32314	2415 N. Monroe	Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION 1 CONTROL OF

2023 JUNION AH 653

K2 TECH 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 04/21/2023	and assigned
Florida document number L23000199025		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Andrew and Jeremy LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	C" 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)		
		<del></del>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	nddress on our records, <u>enter</u>	the name of the new registered
New Registered Office Address:		
	Enter Florida street address	
	, FI	orida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agrowers of all statutes relative to the proper and complete accept the obligations of my position as registered agent as publically being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, av provided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is
	aina Registered Agent Signature	

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	<u>Name</u>	Address	Type of Action
	<del> </del>		□Add
			□Remove
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			□Remove
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			□ Change

## Page 2 of 3

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lf an ef <u>Note:</u>	ive date, if other than the date of filing:
ne red The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	June 5th. 2023.
	·
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00