L23000220359

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Kenly Immigration and Translation Services LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luders Joseph
Name of Person

Firm/Company

3690 N State Rd 7
Address

Lauderdale Lakes FL 33319
City/State and Zip Code

LudersJoseph2013@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luders Joseph at (954) 417 0110
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

August 13, 2025

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

RE: Articles of Amendment – KENLY IMMIGRATION & TRANSLATION SERVICES LLC

Dear Sir or Madam,
Enclosed please find the Articles of Amendment for **KENLY IMMIGRATION & TRANSLATION SERVICES LLC**, Document Number **L23000220359**, to update the authorized persons for the company. Included in this envelope are:

1. The completed and signed Articles of Amendment form.
2. A check in the amount of $25.00 payable to "Florida Department of State" for the filing fee.

Please process this amendment and send confirmation to the address listed below. Should you have any questions, you may contact me by phone or email.

Thank you for your prompt attention to this filing.

Sincerely,

Joseph, Luders
Authorized Person / Manager
3690 N State Rd 7
Lauderdale Lakes, FL 33319

Phone: (305) 763-5303

Email: LUDERSJOSEPH2013@GMAIL.COM

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 7, 2025

LUDERS JOSEPH
3690 N STATE ROAD 7
LAUDERDALE LAKES, FL 33319

SUBJECT: KENLY IMMIGRATION & TRANSLATION SERVICES LLC
Ref. Number: L23000220359

We have received your document for KENLY IMMIGRATION & TRANSLATION SERVICES LLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The entity's date of incorporation/organization must be listed in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 725A00022648

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Kenly Immigration & Translation Services 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 05/04/2023 and assigned Florida document number L23000220359.

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."

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)

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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 *Zip Code*

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 Changing 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

Title	Name	Address	Type of Action
VP	Joseph Jean	3690 N State Rd 7 Lauderdale Lakes FL 33319	☐ Add ☐ Remove ☐ Change
PRo	Joseph Cindy	3690 N State Rd 7 Lauderdale Lakes FL 33319	☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: August 13 2025 **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated octobre 17 . 2025 .

Luders Joseph

Signature of a member or authorized representative of a member

Luders Joseph

Typed or printed name of signee