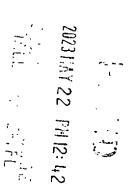
## 13000 13115

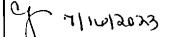




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## **COVER LETTER**

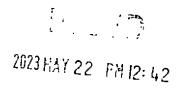
	ision of Corp				
SUBJECT:	Kaja Rental	& Tours LLC			
SUBJECT		Name of Lim	ited Liability Company		·
Thla.i	l Aminlos of	A manadament and foo(s) are sub-	minud for films		
		Amendment and fee(s) are sub	_		
Please return	all correspor	ndence concerning this matter	to the following:		
		Andreas Schwarz			
			Name of Person		
		<u> </u>	Firm/Company		<del></del>
		2006 m 1	типосопавлу		
		2885 Triggerfish St	A 11	<del>_</del>	
			Address		
		Matlacha, FL 33993		<del></del>	
		blacky03@aol.com	City/State and Zip Code		
		· · · · · · · · · · · · · · · · · · ·	to be used for future annual	report notification	n)
For further is	nformation co	oncerning this matter, please ca	all:		
Andreas Sch	warz		239 544 at ()	11956	
	Name of	Person	Area Code	Daytime Telep	phone Number
Enclosed is a	a check for th	e following amount:			
□ \$25.00 F	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is encl		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	iling Address	_	Street Ac		
Registration Section			Registration Section Division of Corporations		
Division of Corporations P.O. Box 6327		The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Kaja Rental & Tours LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A rionda	Limited Liability Company)	- '
The Articles of Organization for this Limited Liability Conference of Organization for this Limited Liability Conference of Conf	ompany were filed on 05/04/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	(ESS)	
Enter new mailing address, if applicable:	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter r tortua street address	
	, Florida	Zip Code
Now Designated Agent's Signature if changing Pegisteres	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 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

<b>Title</b>	<u>Name</u>	Address	Type of Action
MGR	Andreas Schwarz	2885 Triggerfish St	■Add
		Matlacha, FL 33993	□Remove
			□Change
			□Remove
		<del> </del>	
		<del> </del>	
			□Remove
			Change
		<del> </del>	□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□ Change

Fffec	tive date, if other than the date of filing: (optional)
(If an c Note	ffective 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
the reco	ord 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 filed.
Date	05/18/2023
Date	A. 50
	Signature of a member or authorized representative of a member

Typed or printed name of signee