L23000256647

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
RA MUST
Special Instructions to Filing Officer: RA MUST Sign

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03/21/24--01011--001 **25.00

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April 9, 2024

KENNETH LEWIS, ESQ 3940 NW 75 TERRACE LAUDERHILL, FL 33319

SUBJECT: KLEVER ENTERTAINMENT AND MANAGEMENT GROUP LLC

Ref. Number: L23000257647

We have received your document for KLEVER ENTERTAINMENT AND MANAGEMENT GROUP 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):

The registered agent must sign.

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.

Letter Number: 724A00007665

Morgan E Lovett Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Div	ision of Corp	porations			
SUBJECT:	KLEVER E	NTERTAINMENT AND MAI	NAGEMENT GROUP LLC		
	Name of Limited Liability Company				
The enclosed	f Articles of a	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspor	ndence concerning this matter (to the following:		
		KENNETH I., LEWIS, JR.			
	•		Name of Person		
			Firm/Company		
		3305 COLLEGE AVNENU	JE		
			Address	Massachine	
		DAVIE, FLORIDA 33314			
			City/State and Zip Code		
		kenllewis@yahoo.com			
		E-mail address: ()	to be used for future annual report no	ification)	
For further i	nformation co	oncerning this matter, please ca	all:		
KENNETH	L. LEWIS		954 682-7530 at ()		
Name of Person Area Code Daytime Telephone Number				ne Telephone Number	
Enclosed is	a check for th	e 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:

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KLEVER ENTERTAINMENT AND MANAGEMENT GROUP LLC

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

	(A Fiorida Limited)	machity Company)		
The Articles of Organization for this Limited Li Florida document number L23000257647		were filed on $\frac{05/2}{}$	5/2023	and assigned
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	the limited liab	ility company her	<u>'e</u> :	
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the des	signation "LLC" or the abbr	reviation "L.L.C."
Enter new principal offices address, if applica	3940 NW 75 TEF	RRACE		
(Principal office address MUST BE A STREET ADDRESS)		LAUDERHILL, FL. 33319		
Enter new mailing address, if applicable:		3940 NW 75 TERRACE		
(Mailing address MAY BE A POST OFFICE BOX)		LAUDERHILL, I	FL. 33319	
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent:	egistered office : s here: KENNETH L.		cords, <u>enter the name</u>	of the new registered
Name of New Registered Agent.				:
New Registered Office Address:	3940 NW 75 T	 _	da street address	<u></u>
	LAUSTACOLULI			o
	LAUDERHILI	Cuy	Florida 3331	Zin Coda
New Registered Agent's Signature, if changing R	onictored Ament	•		sy' oue .
The state of the s	CEMELOU MECHI.	i		

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

Page 2 of 3

4.0

D. If amendi	ing any other informat	ion, enter change	e(s) here: (At	ach additional si	neets, if necessary.)
						
_		· · · · · · · · · · · · · · · · · · ·				
						
			 			
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					 -	
		-	 .			
(It an effectiv <u>Note:</u> If the	date, if other than the of the date is listed, the date must be date inserted in this block of the De	date of filing; be specific and canno ck does not meet the	he applicable st	of filing or more that atutory filing requ	(optional) n 90 days after filing.) irements, this date w	Pursuant to 605,0207 (3)(bill not be listed as the
If the record (b) The 90	d specifies a delayed th day after the reco	effective date, rd is filed.	but not an	effective time,	at 12:01 a.m. o	n the earlier.of:
Dated API	RIL 16	202	24			
			X	0	<u> </u>	
	:	Signature of a membe	er-or authorized i	epres entative of a n i	ember	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00

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
MGR	ELLIOT ZIMMERMAN	1776 N. PINE ISLAND ROAD224PLANT	
			≣Remove
			□Change
			□Add
		·	□ Remove
			⊟Chan gc
			□Add
			□Remove
		- <u></u>	
		<u></u>	□Add
			Пепыче
			□Change
			□Add
			□ Remove
			Change
			□Add
			□Remove
			□Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ELLIOT ZIMMERMAN	1776 N. PINE ISLAND ROAD224PLANTATION, FI	L _ □Add
			_ ≡ Remove
			_ 🗆 Change
MGR	CLEON EARLE	3940 NW 75 TERRACE, LAUDERHILL, FL 33319	_ □Add
			_ □Remove
			_ ≣ Change
MGR	TRICIA GRIER	3940 NW 75 TERRACE, LAUDERHILL, FL. 33319	_ 🗆 Add
			_ □Remove
			_ = Change
MGR	KENNETH LEWIS	3940 NW 75 TERRACE, LAUDERHILL, FL. 33319	_ □Add
			_ □Remove
		.	_ = Change
			_ □Add
			_ □Remove
			_ □Change
			_ DAdd
			_ □Remove
			МС ъ