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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KHLOE VVS LLC

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T. LEMIEUX NOV 13 2023

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KHLOE VVS LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L23000328819		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Linbi	fity Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:	22 NE 1 ST UNIT 301	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33132	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		·
 If amending the registered agent and/or registered office a gent and/or the new registered office address here: 	address on our records, <u>enter the nam</u>	e of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	3119
	, Florida	Zip Code
ew 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 oddress, 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
		Change	
			□Remove
		☐ Change	
		⊡ ∧dd	
			□Remove
		Z-Add	
			□Add

D 15	
D. II ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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F Effective	to dota if allow the set of the s
U an effec	te date, if other than the date of filing:
	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
If the record record is filed	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
Dated _	OVEMBER 7 2023
	* Jakko
	Signature of a member or authorized representative of a member
	LAZARO Y GUZMAN
	Typed or printed name of signee