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From:

Account Name : THE ELITE CARRIER SERVICES OF MIAMI LLC

Account Number : I20120000040 Phone : (305)405-2600 Fax Number : (305)405-2601

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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INVESTMENT BY KVC II, LLC.

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| | INVESTMEN | RT BY KVC II, LLC. | | |
| SUBJE | | | ed Lishility Company | · <u>······</u> · |
| The en- | closed Articles of A | mendment and fee(x) are subn | nitted for filing. | |
| | | dence concerning this matter to | | |
| | | MA | RIA V CASTELLANOS | |
| | | | Name of Person | _ |
| | | | Pirm/Company | |
| | | 8 | 245 NW 93RI) STREET | |
| | | | Address | |
| | | 1 | MEDLEY, PL 33166 | |
| | | | City/State and Zip Code | <u> </u> |
| | | VICK | Y@INSBEYOND.COM | _ |
| | | E-mail address: (| o be used for future annual report notif | cation) |
| For lu | ether information co | neerning this matter, please co | il: | |
| MAR | IA V CASTELLAN | ios | at () 413-8602 Area Code Daylina | Telephone Number |
| | Name of | Person | Alex Control | · |
| Fincle | sed is a check for th | ic following amount: | | |
| | | S30.00 Filing Fee & Certificate of Status | (3 \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee, Certificate of Status & Certified Copy (udditional copy is enclosed) |

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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

| INVESTMENT E | • | | |
|---|---|---------------------------------------|----------------|
| (<u>Name of the Limited Liability Comp</u> (A Florida Limited | nany as (t now appears on our records.) Liability Company) | | |
| The Articles of Organization for this Limited Liability Compan | y were filed on 07/26/2023 | and ass | signed |
| Florida document number L23000353508 | | | J |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited lial | blity company here: | | |
| INVESTMENT BY KVC GROUP II, LLC | | | |
| The new name must be distinguishable and contain the words "Limited Liab | ility Company," the designation "LLC" or the | he 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 unending the registered agent and/or registered office event and/or the new registered office address here: | address on our records, <u>enter the r</u> | name of the new | <u>registe</u> |
| Ben and of the new registered office address there. | | | |
| Name of New Registered Agent: | | | |
| • | | | |
| New Registered Office Address. | Enter Florida street address | | |
| | rater Propaga su cer agaress | | 2023 |
| | , Florida | | ين ——— |
| | City | Zip Code | .5 |
| Serv 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 fitle, name, and address of each person being added or removed from our records:

| MGR = | Manager | |
|--------|------------|--------|
| AMBR ≔ | Authorized | Member |

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| Title | Name | Address | Type of Action |
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