

L23000437667

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

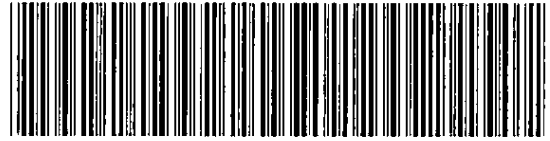
(Business Entity Name)

(Document Number)

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10/23/23--01031--027 **25.00

2023 OCT 23 PM 6:09

11/1/2023

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: KETO TAROT 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:

AUGUSTIN QUANCARD

Name of Person

KETO TAROT LLC

Firm/Company

5205 CONGRESS AVE, APT 126

Address

BOCA RATON, FL 33487

City/State and Zip Code

AUGUSTIN.QUANCARD@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AUGUSTIN QUANCARD

312

622-2692

at (_____) _____

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

KETO TAROT LLC

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

2023 OCT 23 PM 6:09

The Articles of Organization for this Limited Liability Company were filed on 09/15/2023 and assigned.

Florida document number L23000437667.

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:

5205 CONGRESS AVE

(Principal office address MUST BE A STREET ADDRESS)

APT 126

BOCA RATON, FL 33487

Enter new mailing address, if applicable:

5205 CONGRESS AVE

(Mailing address MAY BE A POST OFFICE BOX)

APT 126

BOCA RATON, FL 33487

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:

AUGUSTIN QUANCARD

New Registered Office Address:

5205 CONGRESS AVE, APT 126

Enter Florida street address

BOCA RATON

City

Florida 33487

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	AUGUSTIN QUANCARD	5205 CONGRESS AVE	<input type="checkbox"/> Add
		APT 126	<input type="checkbox"/> Remove
		BOCA RATON, FL 33487	<input checked="" type="checkbox"/> Change
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(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.

Dated OCTOBER 16, 2023

Signature of a member or authorized representative of a member

Typed or printed name of signee