L23000441934

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COVER LETTER

Registration Section

TO:

Division of Co	orporations					
Buckeye	Road, LLC					
Name of Limited Liability Company						
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	pondence concerning this matter	to the following:				
	Jeffery S. Hills					
		Name of Person				
	Buckeye Road, LLC					
		Firm/Company				
	111 S Armenia Ave					
	Tampa, FL 33609					
		City/State and Zip Code				
	davdzhieva@eisenhowerpro					
		to be used for future annual report noti	ncation)			
For further information	concerning this matter, please c	all:				
Jeffery S. Hills		813 443-0809 at ()				
Name	of Person	Area Code Daytim	e Telephone Number			
Enclosed is a check for	the following amount:					
□ \$25.00 Filing Fec	☐ \$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 Addr Registration Division of P.O. Box 63 Tallahassee	n Section Corporations 327	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations Callahassee e Street, Suite 810			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Buckeye Road, LLC		
(Name of the Limited Liability Comp (A Florida Limited	nany as it now appears on ou Liability Company)	ır records.)
The Articles of Organization for this Limited Liability Compan	y were filed on 9/22/2023	and assigned
Florida document number L23000441934		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
EPG KBar Holdings, LLC		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designat	ion "LLC" or the 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)		
	-	
3. If amending the registered agent and/or registered office	address on our records	s, enter the name of the new register
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	eet address
		, Florida
	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 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			Change
			□Add
			□Remove
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	d specifies a de th day after the			not an effectiv	∕e time, at 12:	01 a.m. on the	earlier of
ated	Septemb	er 17	<u>2024</u>	77			
		Č:			ata b-		 :
		Signature of	la memorer or au	thorized represent	auve of a member		

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Filing Fee: \$25.00