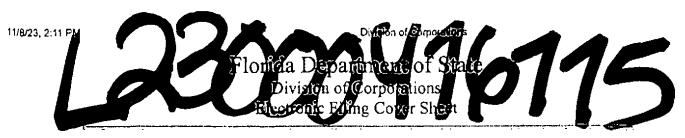
To:



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(((H23000388236 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAX ZONE INC.

Account Number : I20190000844

Phone : (407)888-3131

Fax Number : (888)453-0509

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MAX KRON LLC

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Page Count	07
Estimated Charge	\$25.00

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TISTEMIEUX NOV - 9 2023 To:

COVER LETTER

	Registration Se Division of Cor			*-
CHE TIC	MAX KRO	NLLC		
SUBJEC	T:	Name of Lim	ited Liability Company	
The encio	osed Articles of	Amendinent and fec(s) are sub	emitted for filing.	
Please ret	turn all correspo	ndence concerning this matter	to the following:	
			Name of Person	, b.,
			Firm/Company	
			Address	***************************************
			City/State and Zip Code	
		E-mail nddress: (to be used for future annual report not	fication)
For furthe	er informution o	oncerning this matter, please c	all:	
programme consistent access	Name of	Person	at () Area Code Duytim	e Telephone Number
Enclosed	is a check for th	c following amount:		
□ \$ 25.0	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 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

MAX KRON LLC

То

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our liability Company)	records,)
The Articles of Organization for this Limited Liability Company	were filed on 10/17/2023	and assigned
Florida document number L23000476775		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	lity company here:	
MAX A KRON LLC		
The new name must be distinguishable and contain the words "Limited Liabit	ity Company," the designatio	n "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:		s with a layer the description of the contract
(Mulling address MAY BE A POST OFFICE BOX)		3
		-
	**************************************	•
B. If amending the registered agent and/or registered office a	iddress on our records,	enter the name of the new registered
agent and/or the new registered office address here:		-m
		Ŋ.
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		•
	Enter Florida street	address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my dut provided for in Chapter	ies, and I am familiar with and 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

, Page: 8_of 9

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2023-11-08 19:19:18 GMT

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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
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			⊡Add
			CRemove
			DAdd
			— □ Remove
			□Change
		// ap	ʿ]Add
			□Remove
			□Change

To:

lf amen	iding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-,	
٠.ــــــــــــــــــــــــــــــــــــ	
Note: If	re date, if other than the date of filing:
e record d is file	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 d.
Dated	Nov. 8 . 2027.
	Liter Xxxx
	Signature of a member or authorized representative of a member
	May Kirm