L23000496758

(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: DESHOW	PROPERTY LLC Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MERCEDES L ESCALAN	УTE	
		Name of Person	~
	DESHOW PROPERTY LI	LC	,
		Firm/Company	
	14962 CATHY LN		المب. م
		Address	
	LARGO, FL 33774		•
		City/State and Zip Code	
	E-mail address: (to be used for future annual report not	ification)
For further information	concerning this matter, please ca	all:	
MERCEDES L ESCAL	ANTE	813 846-6194	
Name	of Person	at ()	ne Telephone Number
Enclosed is a check for	the following amount:		
S25.00 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)
Regis Divis P.O. 1	LING ADDRESS: tration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C	on orations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DESHOW PROPERTY LLC		
(<u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears on mited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Con Florida document number L23000496758	npany were filed on $\frac{10/31/2}{1}$.	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8263 124TH TER	
(Principal office address MUST BE A STREET ADDRE.	LARGO, FL 33773	4
Enter new mailing address, if applicable:	8263 124TH TER	:
(Mailing address MAY BE A POST OFFICE BOX)	LARGO, FL 33773	
		<u> </u>
B. If amending the registered agent and/or register registered agent and/or the new registered office address Name of New Registered Agent:		r records, enter the name of the
New Registered Office Address: 8263 124	TH TER	
Negistered Office Hadiens.	Enter Florida s	treet address
LARGO		, Florida 33773
	City	Zip Code
New Registered Agent's Signature, if changing Registered A	Agent:	
hereby accept the appointment as registered agent an	d agree to act in this cape	acity. I further agree to comply with

If Changing Registered Agent, Signature of New Registered Agent

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 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>	<u>Address</u>	Type of Action
AMBR	MERCEDES L ESCALANTE	14962 CATHY LN LARGO, FL 33774	🗖 Add
			■ Remove
			☐ Change
AMBR	MERCEDES L ESCALANTE	8263 124TH TER LARGO, FL 33774	≅ Add
			□ Remove
			Change
			Add
			☐ Remove
			□ Change
			□ Rêmove
			□ Change
			Add
			□ Remove
			□ Change
			Add
			Remove
			Change

	N/A	
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If an ef Note:	ive date, if other than the date of filing:	5.0207 ed as t
ie re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies 90th day after the record is filed.	er of
Dated	November 06 2023	
	Signature of Amember or authorized representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00

COVER LETTER

TO: Registration Se Division of Cor			
PREMIER SUBJECT:	KASAS LLC		
50bjr.C1:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	_	
	MERCEDES L ESCALAN		
		Name of Person	
	PREMIER KASAS LLC		
		Firm/Company	-2
	14962 CATHY LN		· · · · · · · · · · · · · · · · · · ·
		Address	
	LARGO, FL 33774	<u> </u>	1
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	ication)
For further information c	oncerning this matter, please c	all:	
MERCEDES L ESCAL	ANTE	813 \$46-6194	
Name o	of Person		Telephone Number
Enclosed is a check for t	he 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)
MAII	ING ADDRESS:	STREET/COURIE	ER ADDRESS:

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PREMIER KASAS LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited	ny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited l	Liability Company	were filed on 10/31/2023	and assigned
Florida document number L23000496723	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	oility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)	8263 124TH TER	
		LARGO, FL 33773	_s_)
			• :
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	E BOX)	8263 124TH TER	
		LARGO, FL 33773	Ö
			:2
B. If amending the registered agent and registered agent and/or the new registered of			ecords, <u>enter the name of the r</u>
Name of New Registered Agent:		<u>_</u>	
New Registered Office Address:	8263 124TH T		<u></u>
		Enter Florida stree	
	LARGO		, Florida ³³⁷⁷³
		City	Zip Code

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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	MERCEDES L ESCALANTE	14962 CATHY LN	☐ Add
		LARGO, FL 33774	Remove
			□ Change
AMBR	MERCEDES L ESCALANTE	8263 124TH TER	■ Add
		LARGO, FL 33774	☐ Remove
		·	
			□ Add
			☐ Rémove
			□ <u>Ch</u> ange
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		<u> </u>	□ Remove
			Change
			□ Add
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			☐ Change
			□ Remove
			□ Change

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ctive date, if other than the date of filing: 11/8/2023 effective date is listed, the date must be specific and cannot be prior	(optional)
effective date is listed, the date must be specific and cannot be prior eg. If the date inserted in this block does not meet the applic	cable statutory filing requirements, this date will not be listed
ument's effective date on the Department of State's records	•
ecord specifies a delayed effective date, but no	ot an effective time, at 12:01 a.m. on the earli
ne 90th day after the record is filed.	
NOVEMBER 8 2023	
ed NOVEMBER 8 . 2023	_/
	4
Signature of a member or auth	orized representative of a member

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Filing Fee: \$25.00