L23000510703

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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Ky 509 LL Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
,	Lo velie	Simplice Name of Person	
	SK(509 LLC Firm/Company	
	5238 Ri	vermill Lane	
	Lake W	orth Fl 3346 City/State and Zip Code	3
	SKy50911	CO5Camail. Co	\mathcal{M}
For further information c	oncerning this matter, please ca	all:	
LOVE 1'E Name o	Simplice	at (<u>501)</u> 331- Area Code Daytim	-7602 e Telephone Number
Enclosed is a check for the	ne following amount:		
X \$25.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SK4509 LLC	
(Name of the Limited Liability Compa (A Florida Limited L	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000510703</u> .	were filed on November 10,2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	eles of Organization for this Limited Liability Company were filed on November 10,20 and assigned occument number 123000510703. Induced is submitted to amend the following: The meaning name, enter the new name of the limited liability company here: The must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" we principal offices address, if applicable: The diffice address MUST BE A STREET ADDRESS) The mailing address, if applicable: The diffice address of applicable: The designation "LLC" or the abbreviation "LLC" or the abbrevia
The new name must be distinguishable and contain the words "Limited Liabil	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5238 Rivermill Lane
(Principal office address MUST BE A STREET ADDRESS)	Laike worth F1,33463
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new register
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 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 = Manager

AMBR = Authorized Member **Type of Action** 5754 Pebble Brook Lane Add 5238 Rivermill Lane XIAdd Lake Worth ff 33463 | Remove ____ ⊡Change ____ □Change □Remove □ Change

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an effect ote: If	ive date is listed, the date inserted	ie date must be sp in this block d	of filing:	e prior to date of fil applicable statute	ing or more th	(option an 90 days after fil uirements, this d	al) ling.) Pursuant to 60 late will not be lis	5.020 ited a
record s		d effective date	. but not an effec	tive time, at 12:0) I a.m. on the	e earlier of: (b)	The 90th day after	er the
	05/20	\	~ . 20	24				

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Filing Fee: \$25.00