L24000016016

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Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

	Name of Limi	ited Liability Company			
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please return all correspond	dence concerning this matter	to the following:			
	Name of Person Area Code Daytime Telephone Number				
	Name of Person				
	KETI BALLHYSA S	IYSA SLOTA LLC			
	Firm/Company				
	8067 HOBBES WAS	Y	_		
		Address			
	PALM BEACH GA	ARDENS,FL 33416			
		City/State and Zip Code			
	E-mail address: (to be used for future annual report notif	fication)		
For further information co	neerning this matter, please c	all:		-	
KETI BALLHYSA S	LOTA	at (561) 339.61	.43	2024 C	
Name of	Person		e Telephone Number	E 135	
Enclosed is a check for the	e following amount:			. DE 31	m
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy	> ••	

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

Registration Section

Division of Corporations

TO:

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

KETI BALLHYSA SLOTA LLC		
(Name of the Limited Liability Con (A Florida Limite	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on10/21/2024	and assigned
Florida document number L24000016016		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the ab	breviation "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)		
	days on our records onter the non	so of the new registered
B. If amending the registered agent and/or registered offingent and/or the new registered office address here:	te address on our records, enter the mail	
		2024 QE SEORE TALE AH
Name of New Registered Agent:		
New Registered Office Address:		ARY SSF
New Westpielet Office Municipa.	Enter Florida street address	
	, Florida	95 5
	City	Zip Code Co

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 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>	Name	<u>Address</u>	Type of Action
MGR	KETI BALLHYSA SLOTA	8067 HOBBES WAY P.B.G,FL 33418	□ Add
			□Remove
			Change
AMBR	KETI BALLHYSA SLOTA	8067 HOBBES WAY P.B.G,FL 33418	≾\\dd
	50 LO		□Remove
			Change
			□ Add
			□ Remove
			Change 2024 DEC 10 e PH 4:52
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(If an ef	tive date, if other than the date of filing: 12.09.204 (optional) Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursus	antrio 605.0	යා 0 26 7 (3)(1
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will nent's effective date on the Department of State's records.	oi oc nsic	u as uic
the reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th iled.	day after	the
	12.09. 2024		
Dated	· · · · · · · · · · · · · · · · · · ·		
Dated	A		
Dated	Signature of a member or authorized representative of a member		

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