L24000094119

(Requestor's Name)
(Address)
(Address)
,
(6) (6) (7) (7)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
Certified Copies Certificates of Status
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Special instructions to Filling Officer.

Office Use Only



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24 AUS -2 FH ID: 29

COVER LETTER

TO: Registration Sec Division of Cor			
SUBJECT: <u>Ro</u>	Name of Lim	(C)	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
		nce Beck Name of Person	
	KUNWAG	Firm/Company	
	2164 Spa	ingwater Lane	•
	Pont Ona	nge FL 32122 City/State and Zip Code Smail. com to be used for future annual report notific	Sation)
For further information co	oncerning this matter, please ca		
haurence Name of	Beck	at (<u>860</u>) 961 - Area Code Daytime	Z294 Telephone Number
Enclosed is a check for th	e 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)
Mailing Addres	s:	Street Address:	

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

Tallahassee, FL 32303

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

(<u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears mited Liability Company)	on our records.)			
The Articles of Organization for this Limited Liability Company were filed on $\frac{2/22/2029}{2029}$ and assigned Florida document number $\frac{124000094119}{200094119}$.					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited	d liability company her	<u>e</u> :			
The new name must be distinguishable and contain the words "Limited	Liability Company," the des	ignation "LLC" or the abb	reviation "L.L.C."		
Enter new principal offices address, if applicable:			2		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	<u> </u>	- 		
		<u> </u>			
		·.	73		
Enter new mailing address, if applicable:		·			
(Mailing address MAY BE A POST OFFICE BOX)					
		· · · · · · · · · · · · · · · · · · ·	· O		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:	ffice address on our rec ne F L. Bec.		of the new registered		
New Registered Office Address:					
	Enter Floria	la 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>m</u> GR	Janet L. Beck	2164 Springwater Lane	⊠ ∧dd
		2164 Springwater Lane Port Oxange, FL. 32122	3 □Remove
			□Change
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Note:	tive date, if other than the date of filing: Filing Date (optional) Tective date is listed, the date must be specific and cannot be prior of date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3). If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
If the record is f	rd 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 iled.
Dated	1/30/2024 Signature of a member or authorized representative of a member LANDENCE Book
	Jan. BO
	Signature of a member or authorized representative of a member
	V/ Rack

Typed or printed name of signee