L24000185895

(Requ	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Docu	ıment Number))
Certified Copies	Certificate	s of Status
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200436970262

09/24/24--01099--001 **25.00



COVER LETTER

SUBJECT:	Roven and Name of Lim	Corpora U.C. ited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing Please return all correspondence concerning this matter to the following: Haxing A. Michael Name of Person Rayen & Company LCC FirmuCompany The Company LCC FirmuCompany FirmuCompany The Saddress St. Petersburg FL 33407 City/State and Zip Code Haxing that 330 quail. Com E-mail address: (to be used for future annual report notification) Little Chael Back. Com For further information concerning this matter, please call: Maxing Hichael Name of Person Area Code Daytine Telephone Number			
Please return all correspo	ndence concerning this matter	to the following:	
	<u>He</u>	Kine A. Micha	<u>se</u>
	Rad	Firm/Company	رد
	7960	4 2nd Adress	
	St. T	City/State and Zip Code	33707
e e a i e i i	unicha	cibud glack.com	ication)
For further information c	Name of Limited Liability Company osed Articles of Amendment and fee(s) are submitted for filing Furn all correspondence concerning this matter to the following: Haking A. Michael Name of Person Ravens Company This compa		
Maxine H Name o	<u>Uchael</u> Person	at (717) 415 Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee		Certified Copy	Certificate of Status &

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kaven and	1 Company UC	
(Name of the Limited Li	ability Company as it new appears on orida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabili	ty Company were filed on Ap	ov. (19, 2024 and assigned
Florida document number <u>L2400018</u>	<u>5895</u>	
This amendment is submitted to amend the following	g :	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words	Limited Liability Company," the design	nation "LLC" or the abbreviation "L L.C."
Enter new principal offices address, if applicable		
Principal office address MUST BE A STREET AI	ODRESS)	
	<u> </u>	
Enter new mailing address, if applicable:		
<u>(Mailing address MAY BE A POST OFFICE BOX</u>		······
		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or r		r records, enter the name of the new
registered agent and/or the new registered office	address here:	
N 611 B 11 11		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida s	trut address
	Linei Piorida s	
	City	Florida 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>AHBR</u>	Reid Lague	2914 2nd Ave South	
		St. Petersburg Fr. 3370	7 Kemove
			Change
			□ Add
			Remove
			Change
			Remove
			Change
			Add
			Remove
			Change
			Add
			☐ Remove
			Change
			Remove
			□ Change

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Note:	ive date, if other than the date of filing: Sept. 18 2024 (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 is lift the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the next seffective date on the Department of State's records.
The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00