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# L2400200473

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# **COVER LETTER**

### TO: Registration Section Division of Corporations

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THE CULINARY METHOD LLC

SUBJECT: \_\_\_\_

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Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

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Please return all correspondence concerning this matter to the following:

	Kevin Prouty		
		Name of Person	
	The Real Accounting Co.		
	·······	Firm/Company	······
	10122 Pointview Court		
	, <u></u>	Address	
	Orlando, FL 32836		
		City/State and Zip Code	、 
kevin@therealaccountingco.com			
	E-mail address: (	to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	<u>.</u>
Kevin Prouty	603 790-3424		
Name of Person		at () Area Code Daytim	ne Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration S	Section	Registration Se	ection

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

THE CULINARY METHOD LLC		
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	<u>y as it now appears on our records.</u> ) ability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number <u>1.24000200473</u>	vere filed on <u>4/29/24</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
KP Home Buyer LLC		
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the abbr	eviation "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)		5.
		<u>.</u>

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	ddress
		. Florida
	City	Zip Code

# New Registered Agent's Signature, if changing Registered Agent:

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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	Address	Type of Action
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			Change
		<u>_</u>	🗆 Add
			🗆 Remove
			□Change

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

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			(T.)

E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_(optional) (If an effective 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

May Dated	23rd		2024
15ulea	Them	Prevy	
-		Signature of a m	ember or authorized

d representative of a member

Kevin Prouty

Typed or printed name of signee