L24000257994

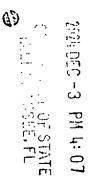
(Requestor's Name)
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COVER LETTER

Kingde	om Key Realty Group LLC		
SUBJECT:			
	s of Amendment and fee(s) are subi	-	
Please return all corre	espondence concerning this matter (to the following:	
	Andrew Pierce		
		Name of Person	
	CINDY'S FLORIDA LLC		
		Firm/Company	
	8051 N. Tamiami Trail STI	E F6	
		Address	
	Sarasota, Florida, 34243		
		City/State and Zip Code	
	reports@cloudpeaklaw.com		
	E-mail address: (t	o be used for future annual report not	ification)
For further information	on concerning this matter, please ca	di:	2 2021
Andrew Pierce		307 683-0983 at ()	2024 DEC
Nai	ne of Person	Area Code Daytim	re Telephone Number
Enclosed is a check f	or the following amount:		
■ \$25.00 Filing Fe	e \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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

Kingdom Key Realty Group LLC		
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appears on our record limited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Co Florida document number 1.24000257994	empany were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
Kingdom Key Realty Group, LLC		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRI		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6 7 0 22
B. If amending the registered agent and/or registered	office address on our records, <u>enter</u>	the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		Es E
New Registered Office Address:		07 ATE
	Enter Florida street addres	s
	, Flo	orida
	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 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
AMBR	Tailored Holdings LLC	1309 Coffeen Avenue STE 1200	
		Sheridan, Wyoming, 82801	Remove
			☐ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change (2)
			□Addj
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ffective date, if other than the an effective date is listed, the date mustote: If the date inserted in this blocument's effective date on the December 2.	t be specific and o ock does not me	cannot be prior to eet the applicab	date of filing or m le statutory filin	ore than 90 days af	tional) ter filing.) Pu his date wi	rn ursuant to 60 Il not be lis	05.0207 sted as
record specifies a delayed effectiv l is filed.	e date, but not a	an effective time	e, at 12:01 a.m.	on the earlier of:	(b) The 9	0th day aft	ter the
November 22		2024	.•				
, p. 1.							