

17/6/25 14:10

Division of Corporations

H250002161503

L24000280282

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H250002161503)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : MORISON TAX TEAM LLC
Account Number : 120200000187
Phone : (786)757-2436
Fax Number : (786)513-5977

2025 JUN 17 PM 4:08
FILED
TALLAHASSEE, FLORIDA
SUNSHINE STATE

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
KO DIGITAL LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$25.00

K. SALY

JUN 18 2025

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Corporate Filing Menu

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COVER LETTER

H250002161503

TO: Registration Section
Division of Corporations

SUBJECT: KO DIGITAL LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

JESUS LEON

Name of Person

MI TAX TEAM LLC

Firm Company

3625 NW 82 Avenue SUITE 318

Address

DORAL, FL 33166

City/State and Zip Code

JESUSLEONTERAN@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JESUS LEON

786 7572436
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2601 Executive Center Circle
Tallahassee, FL 32301

H250002161503

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

H250002161503

KO DIGITAL LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2025 JUN 17 PM 4:09
FILED
TALLAHASSEE, FLORIDA
and assigned

The Articles of Organization for this Limited Liability Company were filed on 06/20/2024Florida document number L24000280282

This amendment is submitted to amend the following:

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 designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)3625 NW 82ND AVESUITE 100KKDORAL, FL 33166

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)3625 NW 82ND AVESUITE 100KKDORAL, FL 33166**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**Name of New Registered Agent:New Registered Office Address:Enter Florida street addressFloridaCityZip 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

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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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Toro Vasquez, Carlos Alberto	3625 NW 82ND AVE SUITE 318	☒ Add
		DORAL, FL 33166	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
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			☐ Add
			☐ Remove
			☐ Change

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CLERK OF DISTRICT COURT
TALLAHASSEE, FL 32301

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

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TAXES
SOUTH
FLORIDA

F. Effective date, if other than the date of filing: _____ (optional)

If an effective date is listed, the date must be specific and cannot be put as 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 record.

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.

Dated JUNE 17 2025

Signature of a member of a political party or committee of a member

CARLOS D. TRUJILLO ANGARETA

Typed on 4000 *Form 501*

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Filing Fee: \$25.00

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