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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Kato's Decorational Planner LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Kellin Y. Rapalo
Name of Person

Kato's Decorational Planner LLC
Firm/Company

27 East Saint Louis Avenue
Address

Eustis Fl. 32726
City/State and Zip Code

Kellin_alvarez@Hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kellin Rapalo at (407) 536-3310
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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Kato's Decorational Planner LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Dominga Rapalo
Name of Person

Kato's Decorational Planner LLC
Firm/Company

1809 South Bay street
Address

Eustis FL. 32726
City/State and Zip Code

Domy-Alvarez@Hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dominga Rapalo / Kellin Rapalo at (352) 255-4168 / 407-536-3310 Kellin Rapalo
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)

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Tallahassee, FL 32314

Street Address:
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The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Kato's Decorational Planner LLC

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

The Articles of Organization for this Limited Liability Company were filed on 07/23/2024 and assigned Florida document number L24000327134

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Same

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)

N/A

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

N/A

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: Same

New Registered Office Address: _____
Enter Florida 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

Title	Name	Address	Type of Action
AMBR	Luis Bapalo	1809 South Bay Street Eustis Fl 32726	☐ Add ☑ Remove ☐ Change
AMBR	Luis A. Bapalo	1809 South Bay Street Eustis Fl. 32726	☐ Add ☑ Remove ☐ Change
AMBR	Elvin A Rodriguez-Pineda	1809 South Bay Stret Eustis Fl. 32726	☐ Add ☑ Remove ☐ Change
AR	Kellin Y. Bapalo	27 East Saint Louis Av. Eustis Fl. 32726	☑ Add ☐ Remove ☐ Change
AP	Katylynn Y. Bapalo	1809 South Bay Stret Eustis Fl. 32726	☑ Add ☐ Remove ☐ Change
			☐ Add ☐ Remove ☐ Change

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TALLAHASSEE, FL

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

I would like you to removed the 3 persons listen on page list, instead add Kellin y Rapalo & Katylynn y. Rapalo as a Authorized Person & Authorized Representative. everything else will Sty the same, no changes.
if yal have any Questions please feel free to Contact me at (407) 536-3310 or (352) 255-4168 Thank you.

Also I sent two Covers letters, one with my information as a owner/manager & the second one Cover letter under Kellin y. Rapalo the registered agent. use the one that help us to resolve this issue promptly.

E. Effective date, if other than the date of filing: N/A **(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.

Dated August 8, 2024.

Signature of a member or authorized representative of a member

Dominga Rapalo / Kellin Rapalo

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

Filing Fee: $25.00