L24000393497

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(a
(Document Number)
, , , , , , ,
Certified Copies Certificates of Status
Certificates of States
Special Instructions to Filing Officer:

Office Use Only



100441216541

12/17/24--01027--004 **25.00

SUGRETARY OF STATE

COVER LETTER

	Registration Division of (n Section Corporations				į	
SUBJEC		NT 4, LLC.					
SOBJEC		Name of Li	mited Liability Company				
The enclo	osed Articles	s of Amendment and fee(s) are su	bmitted for filing.				
Please re	turn all corre	espondence concerning this matte	r to the following:				
		BUFFY C SKINNER					
			Name of Person	· · · · · · · · · · · · · · · · · · ·			
		 	Firm/Company				
		P.O. BOX 763					
			Address				
		AUBURNDALE, FL 338	23				
			City/State and Zip Code				
		BUFFY@KESCOFLOOR					
		E-mail address:	(to be used for future annual report notifi	ication)			
For furth	er informatio	on concerning this matter, please	call:				
BUFFY	C SKINNER	R	863 287-4319				
-	Nan	ne of Person		Telephone Number			
Enclosed	is a check fe	or the following amount:				2024 [
■ \$25.0	00 Filing Fee	c \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Statu Certified Copy (additional copy is encl	40 1 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	DEC 17 PM 2: 10	7
Mailing Address:			Street Address:		-, C	_	
	Registratio		Registration Sec				
		of Corporations	Division of Corp				
	P.O. Box 6	e, FL 32314	The Centre of Ta				
	т анапаѕѕе	C, FL 32314	Z413 IN. MONTOC	Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KB RENT 4, LLC.			
(Name of the Limit	ted Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L Florida document number L24000393497	iability Company	were filed on 9/09/2024	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
N/A			
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	N/A	
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our records, enter the	name of the new registered
Name of New Registered Agent:	N/A		να. 26
New Registered Office Address:	<u> </u>		24 B T
new registered Office Address.		Enter Florida street address	
		Florida	
		City	Zip Code
New Registered Agent's Signature, if changing l			7: 0::
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi being filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as j registered office	performance of my duties, and Lo provided for in Chapter 605, F.S.	am familiar with and Or, if this document is

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
MGR	BUFFY C SKINNER	P.O. BOX 763	≅Add
		AUBURNDALE, FL 33823	□Remove
			□Change
MGR	CRYSTAL L SKINNER	P.O. BOX 763	□Add
		AUBURNDALE, FL 33823	Remove
		- "	☐ Change
			□Add
			□ Remove
			□Change
 -			2024 DEC
			DEC W7 PMc2: 10
			LJAdd
			☐ Change
			□Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessar	• '
	
.	
	
	× _ · · · · · · · · · · · · · · · · · · ·
	2024
· · · · · · · · · · · · · · · · · · ·	17 ARI
	P
	<u> </u>
E. Effective date, if other than the date of filing: (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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	;.) Pursuant to 605.0207 (3)
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The ecord is filed.	ne 90th day after the
Dated <u>Sept. 13</u> . <u>2024</u> .	
Signature of a member or authorized representative of a member	. .
SIGNATURE OF A INCRIDER OF AUTOOFIZED PEDFESCRICATIVE OF A INCRIDER	

Filing Fee: \$25.00

Typed or printed name of signee