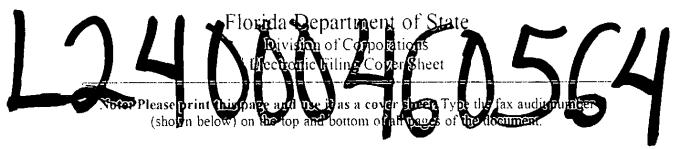
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Division of Corporations



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)389-0502

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

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Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

TO: Registration S Division of Co					
	'S LAIR LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	'Amendment and fee(s) are sub	mutted for filmy			
	ondence concerning this matter	·			
	Mike Town				
		Name of Person			
	Legalzoom com, Inc.				
		Firm Company		,	
	9900 Spectrum Dr			2024 NOV 2	
		Address		NOV	·
	Austin, TX 78717			>- o	ear L
		City/State and Zip Code			ji
	scott@kldiving.com			PM 4: 43	
For further information of	E-mail address. (concerning this matter, please or	o be used for future amual report notifial	ication)	·基 43	
Mike Town	•	800 773-0888			
Ханте «	n' Person	at ()	Telephone Number		
Enclosed is a check for t	he following ansamt				
	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
Regist Diviso	ING ADDRESS: ration Section on of Corporations los 6327	STREET/COURH Registration Section Division of Corpora Clifton Building	п		

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

To: Page: 29 of 51 2024-11-25 16:36:59 PST 13236068205 From: Rajiv Srivastava

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KRAKEN'S LAIR LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.24000460564	were filed on 10/30/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	hty Company," the designation "LLC" or	the abbreviation "L.E.C."
Enter new principal offices address, if applicable:	9200 Overseas Hwy 120 10f	
(Principal office address MUST BE A STREET ADDRESS)	Tavernier, FL 33036	202
		<u> </u>
Enter new mailing address, if applicable:		W 26
(Mailing address MAY BE A POST OFFICE BOX)		
		-
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	la
	Çığ.	Zigi Cira-

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

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records:

2024-11-25 16:36:59 PST

AMBR = .	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
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			☐ Remove
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		***************************************	☐ Remove
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To: • Page: 31 of 51 2024-11-25 16:36:59 PST 13236068205 From; Rajiv Srivastava

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Page 3 of 3

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