L25000127895

(Requestor's Name)
(Address)
(13-13-13)
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(Address)
(City/State/Zip/Phone #)
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(Document Number)
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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

CONCR SUBJECT:	ETE KEEPING IT REAL LL	C		
	Name of I	imited Liability Company	·····	
	of Amendment and fee(s) are s			
rease return an corres	pondence concerning this matt	er to the following:		
	BENSON CADET			
		Name of Person		
		Firm/Company		
	384 NW 82ND TERR			
		Address		
	MIAMI, FL 33150			
		City/State and Zip Code		95 JJH 17 96 Challing 177 J. J.
	E-mail address:	(to be used for future annual report noti	lication)	<u>-</u>
For further information of	concerning this matter, please of	call:		음악 물
BENSON CADET		561 356-1508		5 12 5 12
Name o	f Person	at (Telephone Number	انا _
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of St Certificate of St Certified Copy (additional copy is c	atus &
Mailing Address Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7	Street Address: Registration Section of Corp The Centre of Ta	orations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liab (A Flor	ility Company as it now appears on our records.) ida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L25000127895	Company were filed on 03/17/2025	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	ORESS)	
		<u>, a</u>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		7
	***	15. 11:
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our records, <u>enter the r</u> :	name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

CONCRETE KEEPING IT REAL LLC

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	KERVENS CADET	384 NW 82ND TERR	□Add
		MIAMI, FL 33150	■Remove
			□Change
			Remove Control
			EDAdd E
			□Remove
			□ Change
			□Add
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ctive date if other than	the date of fili	na		(anti	onal)
ective date, if other than effective date is listed, the date e: If the date inserted in thiument's effective date on the	s block does not	meet the applica	to date of filing or nable statutory filin	ore than 90 days after g requirements, thi	r filing.) Pursuant to 605.020 s date will not be listed a
cord specifies a delayed effe filed.	ctive date, but n	ot an effective tii	me, at 12:01 a.m.	on the earlier of: (b) The 90th day after the
JUNE 9		2025	<u> </u>		
س. -	Post				
			rized representative		