

L15000047172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2015 AUG 13 PM 2:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALLY  
EXAMINER  
AUG 13 2015



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

15 AUG 13 PM 2: 22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

July 6, 2015

MARINA TIMOTH  
300 NE 12TH AVE. #301  
HALLANDALE, FL 33009

SUBJECT: MIAMI KITCHENS GROUP LLC  
Ref. Number: L15000047172

We have received your document for MIAMI KITCHENS GROUP LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 815A00014048

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Miami Kitchens Group 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:

Marina Timofiti  
Name of Person

Firm/Company

300 NE 12<sup>th</sup> ave # 301  
Address

Hallandale, FL 33009  
City/State and Zip Code

marina-ameritrex@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marina Timofiti at (786) 955 3683  
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  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
2015 AUG 13 PM 2:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Miami Kitchens Group, 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 03.16.2015 and assigned  
Florida document number L15000047172

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)

300 NE 12<sup>th</sup> ave # 301  
Hallandale, FL 33009

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

300 NE 12<sup>th</sup> ave # 301  
Hallandale, FL 33009

**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:

300 NE 12<sup>th</sup> ave # 301

Enter Florida street address

Hallandale

City

Florida

33009

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Gutu Igor	17570 ATLANTIC BLVD	<input type="checkbox"/> Add
		#217	
		Sunny Isles Beach,	<input checked="" type="checkbox"/> Remove
		FL 33160	<input type="checkbox"/> Change
MGR	Maringa Timofhi	4001 Hillcrest Dr #211	<input type="checkbox"/> Add
		Hollywood FL 33021	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

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(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)

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 26, 2015

Signature of a member or authorized representative of a member

Marina Timofte  
Typed or printed name of signee