Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BARBOSA LEGAL Account Number : I20110000049 Phone : (305)501-4650

Fax Number (305)359-9543

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

Email Address: RENEWALS@BARBOSALEGAL.COM

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN POLIKAT, LLC

Certificate of Status	0
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2017 MAR 30 AM II: 1.1

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### **COVER LETTER**

Division of Cor	
POLIKAT. SUBJECT:	LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspo	ondence concerning this matter to the following.
	BRUNA BARBOSA
	Name of Person
	BARBOSA LEGAL "
	Finn/Company
	407 LINCOLN ROAD PH-NE
	Address
	MIAMI BEACH, FL 33139
	City/State and Zip Code
	RENEWALS@BARBOSALEGAL.COM  E-mail address: (to be used for future annual report notification)
For further information c	oncerning this matter, please call:
BRUNA BARBOS	A 305 501-4680
Name o	f Person Area Code Daytime Telephone Number
Enclosed is a check for the	ne following amount:
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  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

03/30/17 10:42AM EDT Barbosa Legal ->

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## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

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POLIKAT, LLC		21'	$^{\circ\circ \xi} \mathcal{E}_{(F)}$
(Name of the Limit	ed Liability Comi (A Florida Limited	pany as it now appears on our records.) I Liability Company)	
The Articles of Organization for this Limited Li		y were filed on March 23, 2017	and assigned
Florida document number L17000065307			
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited lia	bility company here:	
N/A			
The new name must be distinguishable and contain the wa	ords "Limited Lint		he abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	N/A	
<u>Principal office address MUST BE A STREE</u>	T ADDRESS)		
Enter new mailing address, if applicable:		N/A	
Mailing address MAY BE A POST OFFICE I	ROY)		
Management Bernard Office	<u> </u>		
		-: -:	
B. If amending the registered agent and/			ter the name of the ne
egistered agent and/or the new registered of	iice address he	<u>re</u> :	
Name of New Registered Agent:	N/A		
New Registered Office Address:			
175 W ROBINSTON OTHER FAULT CSS.		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

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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	Jean Anastase Tzortis	_	407 Lincoln Road PH-NE	
			Miami Beach, FL 33139	■ Remove
MGR	Jean Anastase Tzortzis	-	407 Lincoln Road PH-NE	Add
			Miami Beach, FL 33139	□ Remove
				☐ Change
		-		Add
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effective date is listed, the date na e: If the date inserted in this b iment's effective date on the I	ne date of filing:	be listed
ecord specifies a delayence 90th day after the re-	ed effective date, but not an effective time, at 12:01 a.m. on the cord is filed.	earller
d March 30th	2017	
	*	
***************************************	/s/ Bruna Barbosa Signature of a member or authorized representative of a member	
	S.B. W. W. C. W. W. W. C. W. W. C. W. C. W. C. W. C. W. W. C. W. C	
	BRUNA BARBOSA	

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Filing Fee: \$25.00