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DATE:

7/14/20

NAME: AKWABA LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE CHOCKE

COVER LETTER

TO:

Tallahassee, FL 32314

CHD IECT		LLC		
SUBJEC	_ <u></u>	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	ondence concerning this matter	to the following:	
		SEVERINE GIANESE-PI	TTMAN, ESQ.	
			Name of Person	
		GIANESE-PITTMAN, P.A	٨.	
			Firm/Company	
		100 BISCAYNE BLVD, S	UITE 3070	
			Address	
		MIAMI, FL 33132		
			City/State and Zip Code	
		_		ling. ving: SQ. of Person Company ddress and Zip Code future annual report notification) Street Address: Registration Section
	AKWABA LLC Name of Limited Liability Company			
For further	information c	oncerning this matter, please ca	all:	
SEVERIN	E GIANESE-I	PITTMAN, ESQ.		36
	Name o	f Person		aytime Telephone Number
Enclosed is	s a check for th	ne following amount:		
■ \$25.00) Filing Fee		Certified Copy	Certificate of Status & Certified Copy
	lailing Addres			
Registration Section Division of Corporations		_		
	O. Box 632	•		Corporations of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AKWABA LLC	2020 J 13 F. 2: 53
(Name of the Limited Liah (A Flor	bility Company as it now appears on our records.) rida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number L10000112328	Company were filed on 10/27/2010 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	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 ADD	DRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	-
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 name of the new registe</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida

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 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>	Name	Address	Type of Action
MGR	GUY ANDRE GIANESE	4775 COLLINS AVENUE	
		SUITE 702	
		MIAMI BEACH, FL 33140	
MGR	SEVERINE GIANESE-PITTMAN	100 BISCAYNE BLVD	
		SUITE 3070	
		MIAMI, FL 33132	_
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			☐ Change
			□Add
			CRemove
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Effective date, if other than the fan effective date is listed, the date mus	t be specific and cannot be prior to	date of filing or more than 9	(optional) 0 days after filing.) Pursuant to 6	05.0207
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicab	ole statutory filing require	ments, this date will not be li	sted as
accument 5 criteria e date in the Di	pariment of otale 3 records.			
		ic. at 12:01 a.m. on the ca	rlier of: (b) The 90th day of	ter the
erecord specifies a delayed effective	e date, but not an effective tim		incion to incontinuay ai	
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rd is filed. 7/14 Dated	2020			,
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