L12000087315

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COVER LETTER

TO:	Registration Sec Division of Corp			
CLID	KAWIGO L	LC		
SUB	JECT:	Name of Lin	nited Liability Company	
The e	enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Pieas	e return all correspon	dence concerning this matter	to the following:	
		THOMAS R. HERRERA		
			Name of Person	
		PREMIER TAX & ACCO	UNTING CONSULTANTS INC	
			Firm/Company	
		12301 LAKE UNDERHIL	L ROAD STE 257	
			Address	
		ORLANDO, FL 32828		
		-	City/State and Zip Code	
		TOM@TRHFIN.ORG		
			to be used for future annual report notifica	ation)
For fi	irther information cor	ncerning this matter, please co	all;	
THO	MAS R. HERRERA		407 392-1488 at ()	
	Name of I	Person		elephone Number
Enclo	sed is a check for the	following amount:		
⊟ \$3	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

KAWIGO LI	
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liab Florida document number L12000087315	polity Company were filed on 07/03/2012 and assigned and assigned
This amendment is submitted to amend the follow	ving:
A. If amending name, enter the new name of t	he limited liability company here:
KAWIGO INVESTMENT GROUP LLC	
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable Enter new principal office address MUST BE A STREET	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BO	OX)
3. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>enter the name of the</u> ce address here:
Name of New Registered Agent:	
New Registered Office Address:	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

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

- Charles of testas	
MGR = Manager AMBR = Authorized Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			Change
			Add
			Remove
			Change
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			Remove 37
			Change P F
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			Change
			□ Add
			□ Remove
			☐ Change

. If amending a	ny other into	rmation, ent	ler cha	ange(s)	here:	(Attach	additic	nal she	ets, if n	ecessary.	.)		
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Effective date, (If an effective date	if other than	the date of t	filing:			ne - + 61:		()	(op	tional)	D	405 00	07 (2)
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Filing Fee: \$25.00