

L14,000103222

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

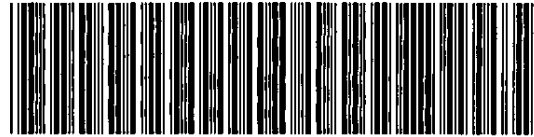
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TALLAHASSEE, FLORIDA

SEP 15 2016

Y SULKER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: KKAD Holdings, LLC**

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Kotler, Esquire

\_\_\_\_\_  
Name of Person

Cohen Kotler, P.A.

\_\_\_\_\_  
Firm/Company

54 SW Boca Raton Boulevard

\_\_\_\_\_  
Address

Boca Raton, Florida 33432

\_\_\_\_\_  
City/State and Zip Code

michael@evoxclabs.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Kotler

\_\_\_\_\_  
Name of Person

at ( 561 ) 361-9600

\_\_\_\_\_  
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**

KKAD Holdings, 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 06/27/2014 and assigned  
Florida document number L14000103222.

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)**

1714 Franklin Street

Suite 402

Oakland, CA 94612

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

1714 Franklin Street

Suite 402

Oakland, CA 94612

**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:

David Kotler, Esquire

New Registered Office Address:

54 SW Boca Raton Boulevard

*Enter Florida street address*

Boca Raton

, Florida 33432

*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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Michael J. Katz	1714 Franklin Street	<input checked="" type="checkbox"/> Add
		Suite 402	<input type="checkbox"/> Remove
		Oakland, CA 94612	<input type="checkbox"/> Change
MGR	Jesus Adaniel	14545 S. Military Trail	<input type="checkbox"/> Add
		Unit 319	<input checked="" type="checkbox"/> Remove
		Delray Beach, FL 33484	<input type="checkbox"/> Change
MGR	Jeffrey M. Korentur	14545 S. Military Trail	<input type="checkbox"/> Add
		Unit 319	<input checked="" type="checkbox"/> Remove
		Delray Beach, FL 33484	<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

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED  
DATE 11/14/01 BY 60322 UCBAW

16 SEP 12  
82016-1  
ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 08-14-2013 BY 60322  
UCBAW/BJA

SEP 12 PM 8:00  
STATIONARY  
ALLIANCE

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated September 7 2016

David Kotler, Esquire

**Filing Fee: \$25.00**