

L15000038722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

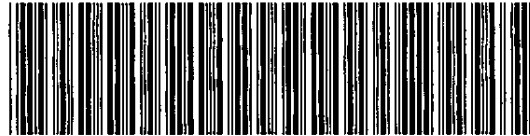
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100276287091

08/24/15--01023--018 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 SEP 24 PM 12:27

FILED

K. SALY
EXAMINER
SEP 28 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 26, 2015

KUNACHIA LLC
SANTIAGO STACEY
989 SE 11TH PLACE
HIALEAH, FL 33010

SUBJECT: KUNACHIA LLC
Ref. Number: L15000038722

RECEIVED
15 SEP 24 PM 4: 14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for KUNACHIA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted is not acceptable for filing. Enclosed is an amendment form 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: 015A00018080

COVER LETTER

**TO: Registration Section
Division of Corporations**

Kunachia LLC

SUBJECT: _____
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:

Santiago Stacey

Name of Person

Kunachia LLC

Firm/Company

989 SE 11th Place

Address

Hialeah, FL 33010

City/State and Zip Code

santiago@kunachia.com

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

For further information concerning this matter, please call:

Santiago Stacey

855 531 0081 ext. 101

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

**TO
ARTICLES OF ORGANIZATION
OF**

Kunachia LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2015 SEP 24 PM 12:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on March 3, 2015 and assigned
Florida document number L15000038722.

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)

989 SE 11th Place

Hialeah, FL 33010

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

989 SE 11th Place

Hialeah, FL 33010

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:

Santiago Stacey

New Registered Office Address:

989 SE 11th Place

Enter Florida street address

Hialeah

Florida 33010

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

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	Santiago Stacey	989 SE 11th Place	<input checked="" type="checkbox"/> Add
		Hialeah, FL 33010	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Carlos Gutierrez	989 SE 11th Place	<input checked="" type="checkbox"/> Add
		Hialeah, FL 33010	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
SEP 14 PM 12:27
TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

FILED
2018 SEP 24 PM 12:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 18/19/2015 (optional)

(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)

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.

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 September 18th

2015



Signature of a member or authorized representative of a member

Santiago Stacey

Typed or printed name of signee