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(Re	questor's Name)	
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(Do	cument Number)	
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COVER LETTER

то:	Registration Sect Division of Corpo			
SUBJE	ст: <u>ko</u> îт	Name of Limit	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The end	closed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspond	lence concerning this matter	to the following:	
		Danielle (10raicoechea Name of Person	
			Name of Person L C Firm/Company	
			Address	
		Miami, FL	33234 City/State and Zip Code	
		dani garai @ h	City/State and Zip Code ot mail- com to be used for future annual report notificati	on)
For furt	her information cor	cerning this matter, please ca		
<u>D</u>	Cantelle Ga	Cai Coechea Person	at (407) 466707 Area Code Daytime Tel	ephone Number
E1	.d to a should be a d	Callanda		
	ed is a check for the			_
□ \$25	i.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

TO ARTICLES OF ORGANIZATION OF

Koitivity LC						
(<u>Náme of the Limited</u> (A	Liability Compan Florida Limited Li	y as it now appears on ability Company)	our records.			
The Articles of Organization for this Limited Liab	bility Company v	were filed on	16/2015		and as	signed
Florida document number <u>L15 0000 67</u>	<u> 101</u> .					
This amendment is submitted to amend the follow	ving:				2018	
A. If amending name, enter the new name of t	he limited liabil	ity company here:		SE IAR		To the second se
The new name must be distinguishable and contain the wor	ds "Limited Liabili	ty Company," the design	nation "LLC" or	the abl	previation "I	. (c. "
Enter new principal offices address, if applicab	ole:			ST	<u></u>	<u> </u>
(Principal office address MUST BE A STREET	ADDRESS)	****	· · · · · · · · · · · · · · · · · · ·	RIDA	2	
			;			
Enter new mailing address, if applicable:		Po Box 34	7454			
(Mailing address MAY BE A POST OFFICE BO	<u>OX)</u>	Miami, FL	-			
						
B. If amending the registered agent and/or registered agent and/or the new registered office			ır records, <u>e</u>	enter 1	the name	of the new
Name of New Registered Agent:	Danielle	Garaicoe	chea		····	
New Registered Office Address:	6637 E	arthgold D Enter Florida	Street address			
	Winder	mere City	, Floric	da	3478C Zip Code	<u> </u>

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

Title	Name	<u>Address</u>	Type of Action
MGR	Danielle Garaicoechea		🗖 Add
			□ Remove
			Change
			
			□ Remove
			Change
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CF	ding data if athough and have the data of filling.
an cf	tive date, if other than the date of filing: (optional) flective 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 605.02
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ment's effective date on the Department of State's records.
e re	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
	e 90th day after the record is filed.
The	e 90th day after the record is filed.
The	e 90th day after the record is filed.
	Daughara
The	Day Chan

Page 3 of 3

Filing Fee: \$25.00