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(Re	questor's Name)	
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## **COVER LETTER**

то:		ation Sec n of Corp			
CHD IE/		WIMECH	LENGINEERING LLC		
SUBJEC			Name of Lin	nited Liability Company	
			mendment and fee(s) are sub		
		•	CHARLENE DEAL	Č	
				Name of Person	
			AVMAR ACCOUNTING	SERVICES INC	
				Firm/Company	<del></del>
			9 SW 13TH ST		
			FT LAUDERDALE, FL 3	3315	
			CHARLENE@AVMARA	City/State and Zip Code CCOUNTING.COM	
For furth	wr infor	mation co	E-mail address: ( neerning this matter, please c	to be used for future annual report notifi	eation) 2 P P P P P
			ncerning this matter, please c		(ng) 17
CHARL	ENE D			954 764-0404 at ()	
		Name of I	Person	Area Code Daytime	Telephone Number
Enclosed	l is a che	eck for the	following amount:		
\$25.0	00 Filin	g 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)
			NG ADDRESS:	STREET/COURIE Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KIWIMECH ENGINEERING LL	.C				
( <u>Name of the Lim</u>	ited Liability Compa (A Florida Limited	iny as it now appears on our reco Liability Company)	ords.)		
The Articles of Organization for this Limited I	Liability Company	were filed on 10/30/2015	and assigned		
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liab	oility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "I.	.l.C" or the abbreviation "ll.,C."		
Enter new principal offices address, if appli	cable:	641 NE 6th Street			
(Principal office address MUST BE A STRE	ET ADDRESS)	Pompano Beach, Florida 33060			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		641 NE 6th Street  Pompano Beach, Florida 33			
Training marress Marri and Training and Training	, , , , , , , , , , , , , , , , , , ,		÷: 22		
B. If amending the registered agent and registered agent and/or the new registered of	l/or registered of office address her	ffice address on our reco e:	rds, enter the name of the		
Name of New Registered Agent:					
New Registered Office Address:	641 NE 6th Str	eet Enter Florida street add	- 0		
	Pompano Beac	1	Florida 33060		
	-	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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
war -	Hewert Brown	641 NE 6th Street	Add
.5		Pompano Beach, Florida 33060	□ Remove
			Change
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			☐ Remove
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effective date is listed, the date must be te: If the date inserted in this bloc ument's effective date on the Dep	k does not meet the applic	caple statutory in	ng requirements, th	nis date will no	be listed t
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record specifies a delayed on the 90th day after the recor	effective date, but no d is filed.	ot an effective	time, at 12:01	a.m. on the	earfier o
ed MARCH 21	2018	·			
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Si	ignature of a member of auth	ouzea representan	e of a member		

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