# 116000012512

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(Ad	dress)	<u> </u>
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(Cit	y/State/Zip/Phone	e #)
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## COVER LETTER

10: Registration Sc Division of Cor			•	
K&K FOO	D INDUSTRIES LLC			
SUBJECT:		ited Liability Company		
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
	ondence concerning this matter			
	Kamen Petrov			
	<del></del>	Name of Person		
	K&K FOOD INDUSTRIE	STLC		
		Firm/Company		
	6013 Wesley Grove BLVD	. STE:202		
		Address		
	Wesley Chapel, FL 33544			
	kamenpetrov6@gmail.com	City/State and Zip Code	<del> </del>	
	E-mail address: (	to be used for future annual report not	itication)	
For further information c	oncerning this matter, please c	all:		
Kamen Petrov		727 275 4603		
Name of Person		at ()	ne Telephone Number	
Enclosed is a check for th	ka fallawina amaunt			
	<del>"</del>	Cossion Medicine	( ) exo men en	
₩ \$25.00 Filing Fee	TI \$30,00 Filing Fee & Certificate of Status	L1 \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	(1 \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing Address:</u> Registration Section		<u>Street Address:</u> Registration Se	ection	
Division of Corporations		Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

### K&K FOOD INDUSTRIES LLC

The Articles of Organization for this Limited Liability Company were filed on L16000012512  L16000012512  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 "LLC."  Enter new principal offices address, if applicable:  (Principal office address AUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Kamen Petrov  6013 Wesley Grove BLMD, STE: 202	(Name of the Lim	i <mark>ited Liability Compa</mark> (A Florida Emided L	ny as it now appears on liability Company)	our records.)	
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 "LLC.  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here:  Name of New Registered Agent:  Kamen Petrov  (0.13 Wester Grove BLMD) STEE 202	The Articles of Organization for this Limited I Florida document number L16000012512	Liability Company	were filed on	016	and assigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC.  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here:    Name of New Registered Agent:   Kamen Petrox   Kamen Petrox					
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here:  Name of New Registered Agent:  Kamen Petrox  Kamen Petrox  Kamen Petrox	A. If amending name, enter the new name	of the limited liabi	dity company here:		
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here:  Name of New Registered Agent:  Kamen Petros  6013 Wester Grove BLMD STEE 202	The new name must be distinguishable and contain the	words "Limited Liabili	ity Company," the design	ation "LLC" or the abbr	eviation "L.L.C."
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here:  Name of New Registered Agent:  Kamen Petrox  (6013 Wester Grove BLM), STE-202	Enter new principal offices address, if appli	icable:			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new reagent and/or the new registered office address here:    Name of New Registered Agent:   Kamen Petrox   Kamen Petrox   Course RIVID STE: 202	(Principal office address MUST BE A STRE	ET ADDRESS)			
Name of New Registered Agent:  Kamen Petrov  6013 Wester Grove REVID STEE 202		<u>: BOX)</u>			
Name of New Registered Agent:  6013 Wester Grove REVID STD: 202	B. If amending the registered agent and/or agent and/or the new registered office addresses	registered office a ess here:	ddress on our recor	ds, <u>enter the name</u>	of the new registere
New Registered Office Address: 6013 Wesley Grove BLVD, STE: 202	Name of New Registered Agent:				
	New Registered Office Address:	6013 Wesley Gro	ove BLVD, STE: 202		
Enter Flori la vivat address			Enter Florida st	reet address	
Wesley Chapel . Florida 33544  Cuy Zip Code		Wesley Chapel		, Florida 3354	1
Cuy Zip Code			Cuy		Zip Code

### <u>N</u>

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>	Address	Type of Action
AMBR	Kamen Petrov	247 11th Ave SW - Largo, FL 33770	
			🖾 Add
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			IBChange
·			UAdd
			: IRemove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: \_\_\_ \_\_\_\_ (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. August H 2022 Dated \_\_\_\_\_\_ Signature of a member or authorized representative of a member Kamen Petrov

Typed or printed name of signee