LIL 0000 77978

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
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SECRETARY OF STATE
AND SECRETARY OF STATE

APR 06 2016

J SHIVERS

	COVER LETTER
	tion Section of Corporations
JBJECT:	BANKOK QUEEN LLC
	Name of Limited Liability Company
e enclosed Artic	cles of Amendment and fee(s) are submitted for filing.
ease return all co	orrespondence concerning this matter to the following:
	Thitari Thonubol
	Thitari Thonubol Name of Person
	Name of Person
	Name of Person BANKOK QUEEN LLC
	Name of Person BANKOK QUEEN LLC Firm/Company
	Name of Person BANKOK QUEEN LLC Firm/Company 13272 SW 144TH TERRACE
	Name of Person BANKOK QUEEN LLC Firm/Company 13272 SW 144TH TERRACE Address
	Name of Person BANKOK QUEEN LLC Firm/Company 13272 SW 144TH TERRACE Address Miami, FL 33186

Enclosed is a check for the following amount:

Name of Person

□ \$25.00 Filing Fee

Thitari Thonubol

\$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:

For further information concerning this matter, please call:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Daytime Telephone Number

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BANKOK Q		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our recordited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Comp. Florida document number L16000037978	any were filed on 02/24/2016	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
BANGKOK QUEEN LLC		
he new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	5)	
Enter new mailing address, if applicable:		20
		555
Mailing address MAY BE A POST OFFICE BOX)		T9 3 17
3235.0		
		S 9. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.
B. If amending the registered agent and/or registered	d office address on our record	
egistered agent and/or the new registered office address	<u>here</u> :	<u> </u>
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
revitegistered Office reduces.	Enter Florida street addre.	SS
	. FI	lorida
	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

<u>Title</u>	Name	Address	Type of Action
		·	
			Remove
			Change
			Add
			Remove
			Change
			
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Page 3 of 3

Filing Fee: \$25.00