Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000344569 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : R&P ACCOUNTING AND TAXES INC

Account Number : I20170000090 : (305)358-1310

: (305)503-6701

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KIKO TATTOO MIAMI LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

If Changing Registered Agent, Signature of New Registered Agent

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION FILED **OF**

		2024 OCT 15	5 PM 4: 20	
KIKO TATTO				
(Name of the Limited Liability Comp (A Florida Limited	Liability Company)	TALLAHASS	EELFLORIDA	
The Articles of Organization for this Limited Liability Compan	y were filed on	03/30/2016	and assigned	
Florida document numberL16000061541				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited list	bility company here	:		
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the design	gnation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)				
Enter new malling address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:		ords, enter the nar		
Name of New Registered Agent:				
New Registered Office Address:	150 SE 2ND AVE STE 404 Enter Florida street address			
	MIAMI		33131	
	City:	, Florida	Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>t:</u>			
I hereby accept the appointment as registered age nt and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	ree to act in this cap te performance of ing provided for in Cha	y duties, and Tam apter 605, F.S. Or	familiar with and , if this document is	

From: Andres Rodriguez

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

2024-10-15 14:26:23 GMT

MGR =	Manager	
AMBR =	Authorized	Member

Title	<u>Name</u>	Address	Type of Action
			□Rетоve
		·	☐ Change
			
			□ Remove
			Change
			
			□Remove
			□Add
			□Remove
			Change
			□ Add
			□ Remove
			□Change
			□ Remove
			☐ Change

						_
						_
•			-			_
						-
 -	. , 					-
						-
				 .		-
						-
	·					-
			- 			_
						_
			<u> </u>			-
						_
						_
				- 5 1	D.3	-
				ME	2024	_
				ÀĤÀ	OCT	*
				SSE	15	
an effective date	if other than the date of i	ic and cannot be prior to date of filing	optic or more than 90 days after	filling:) Pu		05.0207 (
Note: If the date	e inserted in this block does i ctive date on the Department	not meet the applicable statutory	filing requirements, this	idade;will ⊕	l n ot be lis	si ed a s t
				>''	0	
record specifies d is filed.	s a delayed effective date, bu	it not an effective time, at 12:01 a	a.m. on the earlier of: (b) The 90	Oth day aft	ter the
Dated	OCTOBER 9	2004				
	Signature	of a member or authorized pepresen	tative of a member			
		PAULO DE BRITO				
		Typed or printed name of sign	nec	-		