117000107979

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basiness Eliaty Harrie)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only

M. MOON FEB 0 8 2018



300308889263

300308889263 02/08/18--01001--003 **150.00

18 FEB -7 PM 3: 20
18 FEB -7 PM 3: 20
SIGNALIANO OF STATE
SIGNALIANO OF STATE

18 FED -7 AH 8: 14

O SEMIMONS

CORPORATE When you need ACCESS to the world

ACCESS, _____

INC.

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	CERTIFIED COPY		
ĎY.	РНОТОСОРУ	·····	
	CUS		
D	FILING	Amend	
	Lady K, LLC		
-	CORPORATE NAME AND DOCUMENT #)		-
_			
(CORPORATE NAME AND DOCUMENT #)		
_	CORDOD ATE MALIE AND DOCUMENT		
(CORPORATE NAME AND DOCUMENT #)		
-(CORPORATE NAME AND DOCUMENT #)		
-(CORPORATE NAME AND DOCUMENT #)		
(CORPORATE NAME AND DOCUMENT #)		

TO ARTICLES OF ORGANIZATION OF

Lady K, LLC			
(Name of the Li	nited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited	and assigned		
Florida document number 1.17000107979	······································		_
his amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited lis	bility company here:	
he new name must be distinguishable and contain the	words "Limited Lial	oillty Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:		<u></u>
Principal office address MUST BE A STRE	ET ADDRESS)		T. 3
		***	1
Inter new mailing address, if applicable:		1401 W Swann Avenue	<u> </u>
Mailing address MAY BE A POST OFFICE	E BOX)	Tampa, FL 33606	س ن ن ن ب ــــــــــــــــــــــــــــــ
			8
s. If amending the registered agent and egistered agent and/or the new registered of	l/or registered of	office address on our records, <u>e</u> r <u>e</u> :	nter the name of the ne
Name of New Registered Agent:	Jessica Conce	ocion	
New Registered Office Address:	1401 W Swans	1 Avenue	
	Tampa	, Florid	a 33606
	_	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, Manalure of New Registered Agent

or temosen it out out territo.

Approximately the second

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Kristen B Hernandez	2011 W Cleveland Street, Suite A	
		Tampa, FL 33606	Remove
			Change
MGR	Cole M. Hernandez	1401 W Swann Avenue	
		Tampa, F1. 33606	□ Remove
			☐ Change
			☐ Remove ☐ ☐ Change ☐ Add ○
			···
			□ Remove
			Change
			□ Add
			Remove
			Change
			□ Add
			☐ Remove
			Change

-	
_	
_	
_	
_	
-	<u> </u>
_	
_	
	φ
_	
_	
_	
_	
Effective (if an effective Note: If document	re date, if other than the date of filing:
the reco) The 9	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 00th day after the record is filed.
Dated	TEB 6 201B
	Signature of a member or authorized representative of a member
	Pedro M. Hernandez
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00