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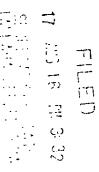
(Re	equestor's Name)	
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Corp	oorations			
	CAFE DE B	ANGKOK, LLC			
SUBJECT:		Name of Limit	ted Liability Company		
The enclosed	I Articles of A	Amendment and fee(s) are subn	nitted for filing.		
Please return	all correspor	ndence concerning this matter t	o the following:		
		WICHAYANEE CHAYAN	NGKURA		
			Name of Person		
		CAFE DE BANGKOK, LL	.C		
Firm/Company				 	
		4828 MIRAMAR DR #230	96		
			Address		
		ST. PETERSBURG, FL 33	708		50 5
		WICHAYANEEC@YAHO	City/State and Zip Code		
		E-mail address: (t	to be used for future annual i	report notification)	<u> </u>
For further i	nformation co	oncerning this matter, please ca	all:		=
WICHAYA	NEE CHAY	ANGKURA	970 901 at ()	1-1604	32
	Name o	f Person	Area Code	Daytime Telephone l	Number
Enclosed is	a check for th	ne following amount:			
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enc	closed) Co	0.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed)
	Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	Registrat	T/COURIER ADDRI tion Section of Corporations Building	ESS:

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAFE DE BANGKOK, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 06/06/2017	and assigned
Florida document number L17000123242		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company." the designation "LLC" or the	e abbreviation "L.L.C."
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)		<u> </u>
B. If amending the registered agent and/or registered of	ffice address on our records, ent	er the name of the new
registered agent and/or the new registered office address her	rendment is submitted to amend the following: seending name, enter the new name of the limited liability company here: ame must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." we principal offices address, if applicable: and office address MUST BE A STREET ADDRESS) ew mailing address, if applicable: address MAY BE A POST OFFICE BOX) mending the registered agent and/or registered office address on our records, enter the name of the	· : 1: ¬
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		. 4 0
New Registered Office Address.	Enter Florida street address	
	Planta	
	, Florida	Zin Coda

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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	PASUMA GREEN	4828 MIRAMAR DR	
		UNIT #2306	■ Remove
		MADEIRA BEACH, FL 33708	□ Change
MBR	ORNCHUMA KELLY	4828 MIRAMAR DR	
		UNIT #2306	Remove
		MADEIRA BEACH, FL 33708	☐ Change
			Add
			Remove
			Change
			□ Add
			Remove
			డు D Remove
			Change
			Add
			Remove

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ffective date, if other than the	date of filing:	(option	ai)	
an effective date is listed, the date mus	t be specific and cannot be prior to date o	i ming of more than 90 days after til	ing.) Pursuant to 605.0 ate will not be listed	0207 d.as
ocument's effective date on the Do	epartment of State's records.			<i>ي</i>
e record specifies a delayed The 90th day after the reco	ord is filed.	fective time, at 12:01 a.r	n. on the earlie	r o
AUGUST II	2017			
Min '	Un /			

Page 3 of 3

Filing Fee: \$25.00