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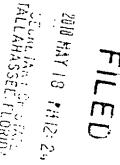
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO; Registration Sec Division of Corp			
CAFE DE B	ANGKOK, ŁŁC		
SUBJECT:	Name of Limi	ted Liability Company	
	Amendment and fee(s) are sub-	•	
Please return all correspor	dence concerning this matter t	to the following:	
	PASUMA GREEN		
	-	Name of Person	
	CAFE DE BANGKOK, LI	.C	
		Firm/Company	
	335 182ND. AVE EAST		
		Address	
	REDINGTON SHORES, F	L 33708	
	JOYTANSUI@YAHOO.CC	City/State and Zip Code	
	-	o be used for future annual report notific	cation)
For further information co	ncerning this matter, please ca	ili:	
PASU MA	GREEN	at (<u>727</u>) <u>503</u> ^	7285
Name (ii	i Ciscii	Area Code Dayline	retephone realmost
Enclosed is a check for the	following amount:		
■ \$25,00 Filing Fee	☐ \$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:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations 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 1) (A.I.	Liability Company as it now appears on our records.) Florida Limited Liability Company)
~	oility Company were filed on 66/06/2017 and assigned
Florida document number L17000123242	·
This amendment is submitted to amend the following	ing:
A. If amending name, enter the new name of the	ne limited liability company here:
The new name must be distinguishable and contain the words	ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:
(Principal office address MUST BE A STREET A	ADDRESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BO.	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the
registered agent and/or the new registered office	e address here.
	Pro-
Name of New Registered Agent	L CAR
Name of New Registered Agent:	THE THE Y
Name of New Registered Agent: New Registered Office Address:	Futer Florida street address

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>	<u>Address</u>	Type of Action
AMBR	PASUMA GREEN	335 182ND, AVE EAST	
		REDINGTON SHORES,	≝ Remove
		FL. 33708	Change
			Add
			□ Remove
			☐ Change
			Remove
			Change
			
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fective date, if other than	the date of fil	ina.				
fective date, if other than an effective date is listed, the date ofe: If the date inserted in the	must be specific :	and cannot be pri	or to date of filing	or more than 90 day:	optional) satter filing.) Pursi	iant to 605.02
ote: If the date inserted in the ocument's effective date on the	IN DIDOCK GOEN HO	a meet me appt	canic stantary	filing requirement	s, this date will n	ot be listed a
record specifies a dela The 90th day after the	yed effective	date, but n	ot an effectiv	e time, at 12:	01 a.m. on th	ne earlier o
The both day after the	record is the	u,				
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Page 3 of 3

Filing Fee: \$25.00