(Requestor's Name)	
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## COVER LETTER

TO: Registration Section Division of Corporatio	ns
SUBJECT:	OK POKOT, LIC.
	Name of Limited Liability Company
	İ
The enclosed Articles of Amend	 nent and fee(s) are submitted for filing.
Please return all correspondence	concerning this matter to the following:
	i
	V AHAGUA SALA ESA
<del></del>	Yattorya Swe Esq. Name of Person
l	, <del></del>
	LA LIM DAG
	Firm/Company
	1
	555 5th Ave. North
	Address
	Cint on a C. 22-101
<u> </u>	St. Retursburg, F.L. 33701 City/State and Zip Code
	micacene Commitme com
	E-mail address: (to be used for future annual report notification)
For further information concerning	le this matter, please call:
Vatacas	501e au 727, 490-9086
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the follow	ang amount:
\$25.00 Filing Fee \$3	0.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee,
,	Certificate of Status Certified Copy Certificate of Status &
	(additional copy is enclosed) Certified Copy (additional copy is enclosed)
	\(
	! -
MAILING AD	
Registration Se	ction Registration Section
Division of Co	
P.O. Box 6327 Tallahassee, FL	Clifton Building 2661 Executive Center Circle
rananassee, PL	2001 EXECUTIVE CERTER CITCLE

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kink Porjot	THE
(Name of the Limited Liability Comp (A Florida Limited	y were filed on September 27,2017 and assigned
	SILL Son, was MONTED
The Articles of Organization for this Limited Liability Company	y were filed on September A (AC) I and assigned
Florida document number 17 (000)0000.	
This amendment is submitted to amend the following:	26
A. If amending name, enter the new name of the limited lial	E71
T .	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or the abbreviation "L.L.C."
Unter new principal offices address, if applicable:	5510 South Russell St.
(Principal office address MUST BE A STREET ADDRESS)	Tampa, F.C. 33611
	·
Enter new mailing address, if applicable:	5510 South Russell St.
(Mailing address MAY BE A POST OFFICE BOX)	Tampay F.C. 33611
D. If amonding the periotand each and/or registered	office address on our records, enter the name of the new
registered agent and/or the new registered office address he	
ļi	
Name of New Registered Agent:	John Racener, Jr.
New Registered Office Address:	510 South Russell St.
	Enter Florida street address
<u> </u>	Con po , Florida 336U Zip Code
	, ,
New Registered Agent's Signature, if changing Registered Agent	
I hereby accept the appointment as registered agent and ag- provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	provided for in Chapter 605, F.S. Or, if this document is
ICh	riging Registered Agent, Signature of New Registered Agent
11 (3)	and and wedgetten telephonete of their trespetent treette

Page 1 of 3

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
MOR		Raisast, Ir.	5510 South Russell S	<u>†</u> . ■ Add
			Tampa, F.L. 33611	Remove
			<del></del>	Сһапде
AP_	Kating	in Sole	555 5th Ave. Worten	
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neffective date is liste te: If the date inse	er than the date of filing:  d, the date must be specific and cannot be prior to date to did in this block does not meet the applicable slate on the Department of State's records.	(optional) e of filing or more than 90 days after filing.) Pursuant to 605.0 statutory filing requirements, this date will not be listed
	s a delayed effective date, but not an ter the record is filed.	effective time, at 12:01 a.m. on the earlier
ted DOCON	or 5 . 2017 .	/
	Statutific of a member or authorized	representative of a member
	Kattorya Sale	ne of signee

Page 3 of 3

Filing Fee: \$25.00