

L17000 261343

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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03/04/19--01023--015 **60.00

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2019 MAR 21 PM 9:40

FILED

3/21/19 QS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 12, 2019

TRACEY JEAN CARTER
2405 31ST AVE NE
NAPLES, FL 34120

SUBJECT: KISS MY ICE, LLC
Ref. Number: L17000261343

2019 MAR 21 PM 4:40
TALLAHASSEE, FLORIDA

FILED

We have received your document for KISS MY ICE, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." Please add the appropriate designation to the name of your limited liability company or to the alternate name you have selected for the state of Florida, if your name is unavailable in this state. The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable.

Please revise Section A of application if amending name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 819A00004974

21 MAR 19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kiss my Ice LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tracey Jean Carter
Name of Person

Kiss my Ice
Firm/Company

2405 31st Avenue NE
Address

Naples, Florida 34120
City/State and Zip Code

Kiss-my-Ice@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tracey Jean Carter at 702 283-3624
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

FILED

2019 MAR 21 9:41

TALLAHASSEE, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Kiss My Ice, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on February 28, 2018 and assigned Florida document number L17000261343

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here

Kiss My Ice, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2405 31st Avenue NE
NAPLES, Florida 34120

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2405 31st Avenue NE
NAPLES Florida 34120

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Tracey Jean Carter

New Registered Office Address:

2405 31st Avenue NE

Enter Florida street address

NAPLES, Florida 34120

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.

Tracey Jean Carter
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>	<u>Type of Action</u>
AMBR	Kenneth B Carter	4072 27th Avenue NE	<input type="checkbox"/> Add
		Naples Florida 34120	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tracey Jean Carter	2405 31st Avenue NE	<input checked="" type="checkbox"/> Add
		Naples Florida 34120	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
SEP 21 2019
CLARK COUNTY FLORIDA

FILED
2019 MAR 21 PM 4:41
CLARK COUNTY, FLORIDA

FILED
2019 MAR 21 PM 4:41
TALLAHASSEE, FLORIDA

Effective date, if other than the date of filing: 01 SEP 2011 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 3-1-2019

Tracey Jean Carter
Signature of a member or authorized representative of a member

Tracey Jean Carter
Typed or printed name of signer