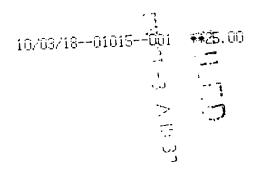


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Prione #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:







COVER LETTER

TO: Registration S Division of Co	Section prporations		
KAVANA SUBJECT:	2, LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	_	
	JAMES GAGEL		
	GAGEL LAW FIRM	Name of Person	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	255 ARAGON AVE 2ND		- اما
		Address	
	CORAL GABLES FL 33	134	
	ADRIANA@JGAGEL.CO	City/State and Zip Code M	·
	E-mail address: (to be used for future annual report notifi-	cation)
For further information	concerning this matter, please c	ail:	
JAMES GAGEL		305 484-4984	
Name (of Person		Telephone Number
Enclosed is a check for t	he 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)
	ING ADDRESS:	STREET/COURIE Registration Section	R ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327

٠,

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KAVANA 2, LLC		
(Name of the Limited Liability (A Florida I	Company as it now appears on our records.) .imited Liability Company)	
The Articles of Organization for this Limited Liability Co	mpany were filed on 01/25/2018	and assigned
Florida document number L1800023030	_•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
		•••
he new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC"	or the abbreviation "L.L.C.;
Enter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDRI	ESS)	i de la companya de l
		> 17
Enter new mailing address, if applicable:		لر، ئ
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address.		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	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, 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
AMBR	KAVANA GROUP, 🎎 🤇	3037 NW 79 AVE DORAL FL	
		33122	
			□ Remove
			Change
AMBR	ARNIAS MORILLO, JOSE G	3037 NW 79 AVE DORAL FL 33122	Add
			-
			■ Remove
	DEL CARMEN AMERICA,	2027 MW 20 AME DOD A - FI	☐ Change
AMBR	YAMEL	3037 NW 79 AVE DORAL, FL 33122	
			رن ∰ Remove
			Change
	·		D Add
			□ Remove
			☐ Change
		. <u> </u>	□ Add
			П Кепюче
			Change
			Remove
			□ Change

		-
		::
(II an e <u>Note</u>	etive date, if other than the date of filing: Directive date is listed, the date must be specific and cannot be prior to date of filing or more If the date inserted in this block does not meet the applicable statutory filing rement's effective date on the Department of State's records.	(optional) than 90 days after filing.) Pursuant to 605.03 equirements, this date will not be listed
If the re (b) Th	ecord specifies a delayed effective date, but not an effective time e 90th day after the record is filed.	e, at 12:01 a.m. on the earlier
Dated	1 - 1/2/18	

Page 3 of 3

Filing Fee: \$25.00