

LI0000 28429

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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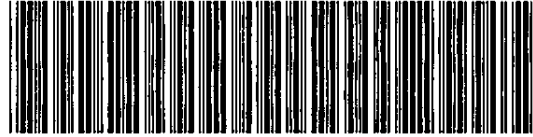
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
18 APR 27 PM 3:09

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APR 30 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: KREYOL KITCHEN, 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:

Ted P. Galatis, Jr.  
(Name of Person)

Ted P. Galatis, Jr., P.A.  
(Firm/Company)

224 Commercial Boulevard, Ste. 205  
(Address)

Lauderdale by the Sea, FL 33308  
(City/State and Zip Code)

For further information concerning this matter, please call:

Ted Galatis at ( 954 ) 522-6730  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
18 APR 27 PM 3:09

KREYOL KITCHEN, 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 January 31, 2018 and assigned Florida document number L18000028429.

This amendment is submitted to amend the following:

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

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

**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: Guylliano Demosthenes

New Registered Office Address: 4973 SW 163rd Avenue  
(Enter Florida street address)

Miramar, Florida 33027  
(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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

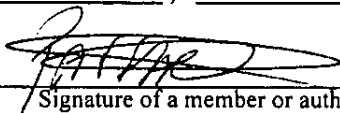
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Edward J. Marko, Jr.	341 NE 45th Street Ft. Lauderdale, FL 33334	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Cassandra Parfait	7821 Normandy Street Miramar, FL 33023 MGRM	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Guylliano Demosthenes	4973 SW 163rd Avenue Miramar, FL 33027	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Johny Luc	1020 NW 76 Avenue Plantation, FL 33322	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Art II - The mailing address of the  
Limited Liability Company is: 4973 SW 163<sup>rd</sup> Avenue,  
Miramar, FL 33027

Dated April 23, 2018



Signature of a member or authorized representative of a member

Cassandra Parfait

Typed or printed name of signee