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(Re	questor's Name)	-
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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05/04/18--01013--012 **25.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: KEK Industries 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:
George le leissi Name of Person
REK Industries LLC
Firm/Company
10635 SW 139 Ct Address
Miami FL 33/86 City/State and Zip Code
City/State and Zip Code Ve/55/\omega nmail \centermal
For further information concerning this matter, please call:
Corry le Veissi at 305 903-1667 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status 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
Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KEK Indu	istries LLC
(Name of the Limited Liabil (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability (Florida document number $82 - 4707792$	Company were filed on $\frac{3/5//8}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDI	RESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	U/A
registered agent and/or the new registered office add	stered office address on our records, enter the name of the new dress here:
Name of New Registered Agent:	
New Registered Office Address: A	Enter Florida street address
	Florida
	City Zig Code
New Registered Agent's Signature, if changing Registere	ed 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 = M $AMBR = A$	Aanager Authorized Member		
Title	Name Anthony Pafundi	Address	Type of Action
()	Hothony Patundi	GIOI Yucaten de Orlando FL	32807 🗖 Add
	<i>y</i>		Remove
			Change
			□ Remove
			□ Change
			Add
			☐ Remove
			C Change
			Remove
			□ Change
			
		- ' '	Remove
			Change
			🗆 Add
			□ Remove
			□ Change

	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
v	tive date, if other than the date of filing: $P_{P,i}$ /8 3018 (options)
ii an e	Elective date is listed, the date must be specific and carried be prior to date of filing or more than 90 days after fitting) Purenting to 605 050
1010	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ment's effective date on the Department of State's records
he re Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m.on the earlier of the earlier
Dated	<u> </u>
	Signature of a member or authorized representative of a member
	C. 02/10/1/201

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