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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:		
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER,

Division of Cor			
	COR LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ANGELICA ALZATE		
	KANU DECOR LLC	Name of Person	
	260 NW 40TH ST.	Firm/Company	
	MIAMI, FL 33127	Address	
	kanudecor@gmail.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	ication)
For further information of	concerning this matter, please ca	all:	
ANGELICA ALZATE		786 295 3595	
Name o	of Person	at () Area Code Daytime	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)

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

KANU DECOR LLC			
(Name of the Lim	ted Liability Comps (A Florida Limited	any as it now appears on our reco Liability Company)	ords.)
The Articles of Organization for this Limited I Florida document number	.iability Company	were filed on March 07, 201	8 and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	oility company here:	
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		56 NW 60TH ST. MIAMI, I	F1.33127
			9
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		56 NW 60TH ST. MIAMI, E	<u> </u>
B. If amending the registered agent and	-	office address on our reco	rds, enter the name of the new
registered agent and/or the new registered of			
Name of New Registered Agent:	ANGELICA ALZATE		
New Registered Office Address:	56 NW 60TH :		·
New Registered Office Address:	N 41 A N 41	Enter Florida street add	
	MIAMI —-	City	Florida Zip Code
		City	141 Since

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, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DENNIS CASTRO	56 NW 60TH ST. MIAMLEL 33127	Add
			■ Add
			☐ Remove
			Change
			□ Remove
			☐ Change
			Remove
			Change
			□ Remove
			Change
			Remove
			Change
			□ Add
			□ Remove
			Change

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ective date, if other than the effective date is listed, the date must e: If the date inserted in this bloument's effective date on the De	be specific and cannot be ack does not meet the a	applicable statutory	g or more than 90 days	optional) after filing.) Pursuant to 60 , this date will not be lis	5.026 ted a
record specifies a delayed he 90th day after the reco	effective date, bu ord is filed.	it not an effect	ive time, at 12:0)1 a.m. on the earl	ier (
February 27th	2019	·			
	Lune	WK12			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00