## 1180000 98159

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

Office Use Only



500330234535

06/13/19--01016--011 \*\*25.00

FILED
SERVICES SELECTIONS
S

JUN 2 5 2019 S. YOUNG

## **COVER LETTER**

TO:	Registration S Division of Co						
CHBH	KING COL	BRA LLC					
Name of Limited Liability Company							
The en	closed Articles of	Amendment and fee(s) are sul	bmitted for filing.				
Please	return all correspo	ondence concerning this matter	to the following:				
		Jeremy Ben-David					
		AXS Law Group, PLLC	Name of Person				
		2121 NW 2nd Ave #201	Firm/Company				
		Miami, FL 33127	Address				
		jeremy@axslawgroup.com	City/State and Zip Code				
		E-mail address: (	to be used for future annual report notif	fication)			
For furt	ther information c	concerning this matter, please c	all;				
Jeremy	Ben-David		305 297-1878				
	Name o	f Person	305 297-1878 at () Area Code Daytime	: Telephone Number			
Enclose	ed is a check for t	he following amount:					
■ \$25	5.00 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

KING COBRA LLC		
(Name of the Limited Liab (A Flor	oility Company as it now appears on our recording Limited Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability	Company were filed on 04/18/2018	and assigned
Florida document number L18000098159	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited 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 ADI	ORESS)	<u> </u>
		13 F
		<b>골</b> □
Enter new mailing address, if applicable:		<u> </u>
$\underline{(Mailing\ address\ MAY\ BE\ A\ POST\ OFFICE\ BOX)}$		21 ID3
B. If amonding the gordetend agent and/or some	Antonial afficient addition on the manual of	4
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad	istered office address on our records <u>ldress here</u> :	, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flo	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, <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	LBRW, LLC	15000 NW 44TH AVE	
		OPA LOCKA, FL 33054	
			■ Remove
		<b>n</b>	□ Change
MGR	Vander Werff, Matthew	7338 NW MIAMI CT	Change
		A44A44 27 22460	<b></b> Add
		MIAMI, FL 33150	□ Remove
			<b></b>
			□ Change
			Remove
		<del></del>	☐ Change
			□ Remove
			☐ Change
	·		Add
			Remove
			☐ Change
		<u> </u>	
			Remove
			Change

		-		
		<del>_</del>	<del></del>	
			<del>.</del>	
	<del> </del>			
-				
	<del>-</del>			
	<del>-</del>			
****				
	· · · · · · · · · · · · · · · · · · ·			
Note: If the date inserted in this	sust be specific and cannot be pri block does not meet the appl	or to date of filing or more thicable statutory filing rec	(optional) han 90 days after filing.) Pursuant to 605.0 puirements, this date will not be listed	207 (3 as th
document's effective date on the	Department of State's record	ls.		
the record specifies a delay- ) The 90th day after the re	ed effective date, but necord is filed.	iot an effective time	, at 12:01 a.m. on the earlier	of:
Dated June 10	2019	·		
	Signature of a member or aut	horized representative of a	member	
Jeremy Ben-David		·		
	Typed or prii	nted name of signee		

Page 3 of 3

Filing Fee: \$25.00