Division of Corporations

Page 1 of 2



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Division of Corporations

Fax Number : (850) 617-6383

From:

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Account Number : I20060300067 Phone : (407)656-5750

Fax Number : (407) 556-0486

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address: bill. asma@ asmapa.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 5

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Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

CONTINKILLC						
(Name of the Limited Linbilley Con (A Florida Limit	ndany as it now andears on our reco	ords.)				
The Articles of Organization for this Limited Liability Company were filed on 6/18/2018 and assign						
Florida document number L18000148692						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited li	ability company here:					
KON-TIKI LLC						
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "Li					
Enter new principal offices address, if applicable:		SEC.				
(Principal office address MUST BE A STREET ADDRESS)						
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		門里口				
Enter new mailing address, if applicable:		<del></del>				
(Mailing address MAY BE A POST OFFICE BOX)		RIGHT 6				
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		ds, enter the name of the				
Name of New Registered Agent:						
	<del></del>	<del></del>				
New Registered Office Address:	Enter Florida street add					
	Enter Piorida street daar	£31				
		Florida				
	City	Zip Code				

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

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR =	Authorized Member		
<u> Tille</u>	<u>Name</u>	Address	Type of Action
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