

L18000150958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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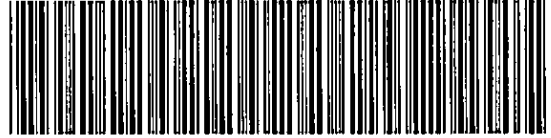
(Business Entity Name)

(Document Number)

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18 JUL -9 PM 2:45
CLERK OF STATE
TALLAHASSEE, FLORIDA

K SALY
JUL 17 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Keistie Dimarakis Investments 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:

Keistie Dimarakis
Name of Person

Firm/Company

9552 Jaybird Ln
Address

Land O Lakes FL 34638
City/State and Zip Code

kdimarakis@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Keistie Dimarakis at (813) 523-3441
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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**

FILED
18 JUL -9 PM 2:45

Kristie Dimarakis Investments 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 6/28/18 and assigned
Florida document number L18000150958

Ein Number
83-1060594

This amendment is submitted to amend the following:

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

Kristie W. Dimarakis LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

9552 Jaybird Ln
Land O Lakes, FL
34638

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9552 Jaybird Ln
Land O Lakes FL
34638

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:

Kristie Dimarakis

New Registered Office Address:

9552 Jaybird Ln

Enter Florida street address

Land O Lakes

City

Florida

34638

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.

Kristie Dimarakis

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
UGR	Kestel Dimarakis	9552 Jaybird Ln Land O Lakes, FL 34638	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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