

L18000158182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

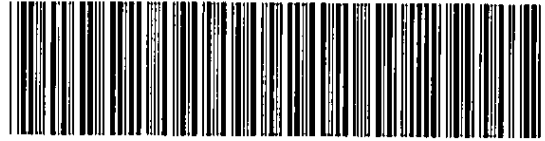
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 21 2019

T SCHROEDER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: reQuited 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:

Zachary Senz Kamler

Name of Person

MONIKL, INC.

Firm/Company

500 EAST KENEDY BLVD.

Address

TAMPA, FL 33602

City/State and Zip Code

zsk54321@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Zachary Senz Kamler

954 304-1414
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

REQRUITED 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 06/27/2018 and assigned
Florida document number L18000158182.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3104 N Armenia Ave #2, Tampa, FL 33607

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3104 N Armenia Ave #2, Tampa, FL 33607

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CLERK OF STATE
TAMPA, FLORIDA

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:

Zachary Senz Kamler

New Registered Office Address:

3104 N Armenia Ave #2

Enter Florida street address

Tampa,

City

Florida 33607

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.

Zachary Senz Kamler
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>
MGR	Monikl INC	500 EAST KENEDY BLVD TAMPA, FL 33602	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Zachary Senz Kamler	4111 41st ave north. st. petersburg fl 33714	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Kenneth Pomella	8849 Cameron Crest Dr Tampa, FL 33626	<input checked="" type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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CLERK OF DISTRICT COURT
STAY
TAMPA, FL 33602

FILED

19 JUN - 8 PM 1:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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19 JUN -8 PM 1:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

Dated 06/03 2019

Zachary Senz Kamler

Filing Fee: \$25.00