

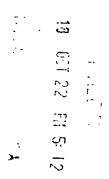
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

то:	Registration Se Division of Cor			
enn i		CCER LLC		
SUBJ	EC1;	Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		DANIEL AREVALO		
			Name of Person	<del></del>
		1783 CORAL RIDGE DR	Firm Company	
		THE COMME RIDGE DR		
		Coral Springs, FL 33071	Address	
		DANIELRX8@HOTMAIL		
		E-mail address: (	to be used for future annual report notif	ication)
For fu	rther information c	oncerning this matter, please ca	all;	
DANI	EL AREVALO		954 551-3112 at ()	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclos	sed is a check for th	ne following amount:		
<b>□</b> \$2	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

THE KIOSK SOCCER LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com- Florida document number $\frac{L18000207604}{L18000207604}$ .	npany were filed on 08/29/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or	the abbreviation "L.E.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	SS)	
		22
Enter new mailing address, if applicable:		ĆĮ.
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		nter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Floric	ia
	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, enter the title, name, and address of each person being added or removed from our records:

MGR'= Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	CHRISTIAN AREVALO	1783 CORAL RIDGE DR	
<del></del>		CORAL SPRINGS, FL 33071	
		GORAL SI KINOS, I E 3,8071	☐ Remove
			☐ Change
MGR	MARTHA RODRIGUEZ	19627 E CYPRESS CT	<b></b>
		MIAMI, FL 33015	Add
		MICAMI, 11. 33013	☐ Remove
		<u> </u>	Change
			•
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ective date, if other than the date of filing:	(optional)
ective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing  the 10 the date incorporal in this blood, door not the applicable structure.	or more than 90 days after filing.) Pursuant to 605.
te: If the date inserted in this block does not meet the applicable statutory ument's effective date on the Department of State's records.	ming requirements, this date will not be liste
record specifies a delayed effective date, but not an effecti he 90th day after the record is filed.	ve time, at 12:01 a.m. on the earlie
october 17th 2018	

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Typed or printed name of signee

Filing Fee: \$25.00