

L190000010000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

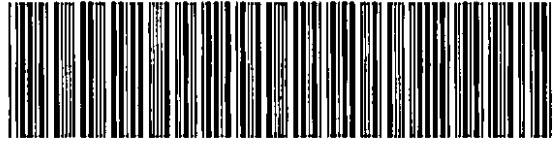
(Document Number)

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19 APR 19 PM 7:18
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19 APR 19 PM 7:18

APR 27 2019

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: K&K OPTIQUE, LLC
Name of corporation to be filed with

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARK WOODLOCK, ESQ.
Name of Person

Woodlock Construction Law Firm, P.A.
Firm or Person
1350 Orange Avenue, Suite, 280
Winter Park, Florida 32789
Address

MARK@WOODLOCKLAW.COM
E-mail address to be used for notices and correspondence to the person

For further information concerning this matter, please call:

MARK WOODLOCK ESQ. 407.409.5305
Name of Person Area Code Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$5.00 Filing Fee &
Certificate of Copy

☐ \$30.00 Filing Fee,
Certificate of Status &
Certificate of Copy

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32311

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Citizen Building
200 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

K & K OPTIQUE LLC

Name of the Limited Liability Company as it now appears on our records.
(All changes to the name of the company must be filed with the Department of Banking and Finance.)

The Articles of Organization for this Limited Liability Company were filed on 01/08/2019

Florida document number L190000010000

This amendment is submitted to amend the following

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

N/A

The new name must be distinguishable and contain the words "limited liability company" or "limited liability corporation" or "limited liability partnership" or "limited liability trust" or "limited liability joint venture" or "limited liability association" or "limited liability partnership" or "limited liability trust" or "limited liability joint venture" or "limited liability association".

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

10049 OAK CREST ROAD
ORLANDO, FL 32827

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

10049 OAK CREST ROAD
ORLANDO, FL 32827

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

KHARAZI JAHROMI, ARMIN

New Registered Office Address:

10049 OAK CREST ROAD

ORLANDO

Florida

32827

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity in strict accordance 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. I am not 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.

N/A

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Persons 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>
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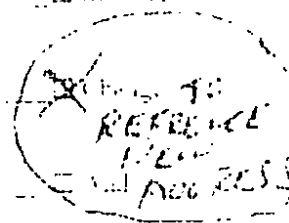
<u>AMBR</u>	<u>KHARAZI, CARMARIE</u>	<u>880 N. MIRAMAR AVE</u>	<u>Remove</u>
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		<u>INDIAN LANTIC, FL 32903</u>	<u>Remove</u>
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Change

<u>AMBR</u>	<u>KHARAZI JAHROMI ARMIN</u>	<u>10049 OAK CREST ROAD</u>	<u>Remove</u>
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		<u>C PLAZA, FL 32829</u>	<u>Remove</u>
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Remove

Change

Remove

Remove

Change

Add

Remove

Remove

Add

Remove

Change

D. If amending any other information, enter change(s) here: *Added additional safety device*

E. Effective date, if other than the date of filing: 12/1 (optional)

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

(b) The 90th day after the record is filed.

Dated APRIL 17 2019

A. Kh

KHARAZI JAHROMI, ARMIN _____, AMER _____