

49000 132101

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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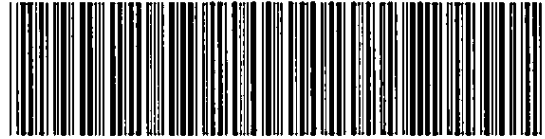
(Business Entity Name)

(Document Number)

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C. GOLDEN

MAR 23 2020

COVER LETTER

**O: Registration Section
Division of Corporations**

SUBJECT: KAYMART LAUNDRY & CELLULAR DEPOT 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:

TUNJI BELLO

Name of Person

KAYMRT LAUNDRY & CELLULAR DEPOT LLC

Firm/Company

16721 NE 6TH AVENUE

Address

NORTH MIAMI BEACH, FLORIDA 33162

City/State and Zip Code

KAYMARTLAUNDROMAT@GMAIL.COM

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

For further information concerning this matter, please call:

TUNJI BELLO

305

305 974 2103

at ()

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

KAYMART LAUNDRY & CELLULAR DEPOT LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2020 MAY -4 PM 4:52

The Articles of Organization for this Limited Liability Company were filed on MAY 15TH 2019 and assigned
Florida document number L19000132101.

This amendment is submitted to amend the following:

. 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 "L.L.C."

Enter new principal offices address, if applicable:

16721 NE 6TH AVENUE

Principal office address MUST BE A STREET ADDRESS

NORTH MIAMI BEACH, FLORIDA, 33162

Enter new mailing address, if applicable:

16721 NE 6TH AVENUE

Mailing address MAY BE A POST OFFICE BOX

NORTH MIAMI BEACH, FLORIDA, 33162

. 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:

TUNJI BELLO

New Registered Office Address:

16721 NE 6TH AVENUE

Enter Florida street address

NORTH MIAMI BEACH

City

Florida 33162

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AR	MARTIN M BANGURA	16721 NE 6TH AVENUE	<input checked="" type="checkbox"/> Add
		NORTH MIAMI BEACH,FLORIDA 33162	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AR	KAYLEEN J BANGURA	651 N.W 177ST	<input type="checkbox"/> Add
		MIAMI, FLORIDA 33169	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
ABR	GLORADINE E LEARD	651 N.W 177ST	<input type="checkbox"/> Add
		MIAMI,FLORIDA,33169	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	TUNJI BELLO	8120 NE 8TH CT	<input checked="" type="checkbox"/> Add
		MIAMI,FLORIDA,33138	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee