# L19000155484

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

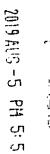
Office Use Only

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C. GOLDEN AUG - 6 2019

# COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: KRAD Consulting Group LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fec(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kathryn Radovan
KRAD Consulting Group LLC
429 Lenox Ave
Miami Beach, FL 33139 City/State and Zip Code
Kathryn Gaokrad. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kathryn Radovan  at (954) 802-1330  Area Code Daytime Telephone Number
Enclosed is a check for the following amount: Already paid
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,  Certificate of Status Certified Copy (additional copy is enclosed)  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



July 11, 2019

KATHRYN RADOVAN **429 LENOX AVENUE** MIAMI BEACH, FL 33139

SUBJECT: KRAD CONSULTING GROUP LLC

Ref. Number: L19000155484

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

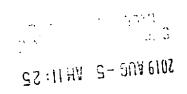
The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

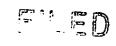
Claretha Golden Regulatory Specialist II

Letter Number: 119A00014047



BECEINED gro.zidnus.www

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



1/0 45	EALY BOOK 20 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -
KRAD Consulting (  (Name of the Limited Liability Co (A Florida Lim	Troup LLC  ompany as it now appears on our records.)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L19000155484</u> .	pany were filed on $\frac{6/12/19}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
N/A	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	429 Lenox Ave
(Principal office address MUST BE A STREET ADDRESS	01 0 1 5 0 0
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	429 Lenox Ave Miami Beach, FL 33139
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	d office address on our records, <u>enter the name of the new</u> <u>here</u> :
Name of New Registered Agent: Mar	k Bernstein
New Registered Office Address: 2131	K Bernstein Hollywood Blvd Ste 508 Enter Florida street address
Holl	y vood Florida 330'20 Ziv Code
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#### 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>	Address	Type of Action
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Effective date, if other than the date of filing:		N/A					
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fective date, if other than the date of filing:  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 ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the occument's effective date on the Department of State's records.  Percord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the record is filed.  August  Signature of a promber or authorized representative of a member							
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