1900059410

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	 -	

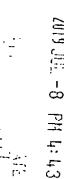
Office Use Only

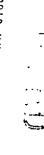


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R. WHITE
JUL 1 7 2019





COVER LETTER

Division of Co	rporations		
GOLDKA SUBJECT:			
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	JACKY KOENIG		
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
	GOLDKAV LLC		
		Firm/Company	
	9801 COLLINS AVE AP	T 9S	
		Address	
	BAL HARBOUR FL 331:	54	
	JACKYKOENIG@HOTM	City/State and Zip Code	
	•	to be used for future annual report notif	ication)
For further information of	concerning this matter, please c		
JACKY KOENIG		786 3972163	
Name o	of Person	Area Code Daytime	Telephone Number
Produce Africa Novale Cons	L. 6.11		
Enclosed is a check for t	-		
■ \$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:

TO:

Registration Section

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**



2019 JUL - 8 PH 4: 43

GOLDKAV LLC				
(<u>Name of the Limite</u> (d Liability Compa A Florida Limited I	ny as it now appears of Liability Company)	on our records.)	
The Articles of Organization for this Limited Lia Florida document number £19000159410	ability Company	were filed on 06/17	7/2019	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here	:	
The new name must be distinguishable and contain the wo	ords "Limited Liabil	lity Company," the desi	gnation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		250 95TH ST UNI	IT 5895	
		SURFSIDE FL 33154		
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE I	BOX)			
				,
B. If amending the registered agent and/oregistered agent and/or the new registered off			our records, <u>ent</u>	er the name of the
Name of New Registered Agent:	JACKY KOENIG			
New Registered Office Address:	9801 COLLINS	S AVE APT 9S		
		Enter Florida	i street address	
	BAL HARBOU		Florida	33154
		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 ad or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JACKY KOENIG	9801 COLLINS AVE APT 9S	■ Add
		BAL HARBOUR FL 33154	5 0
			Change
MGR KAVANA101 LLC	KAVANA101 LLC	250 95TH ST UNIT 7292	
		SURFSIDE FL 33154	■ Remove
			Change
MGR TOVIOI LLC	TOV101 LLC	16400W DIXIE HWY STE 1574	
		MIAMI FL 33160	■ Remove
			Change
			Remove
			☐ Change
			Add
		□ Remove	
			Change
			Remove
			Change

	tion, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
Effective date, if other than the of (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	date of filing:
the record specifies a delayed The 90th day after the reco	l effective date, but not an effective time, at 12:01 a.m. on the earlier of: ord is filed.
Dated	2019
	Signature of a member or authorized representative of a member
JACKY KOENIG	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00