L19000167849

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:





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11/01/19---01024--013 :**25.00

1.1.2: 23

Amend

DEC 0/2 2019

I ALBRITTON

COVER LETTER

TO:	Registration Sec Division of Corp		•	•	
	Krazy Cuba	in Flavor LLC			
SUBJECT: Name of Limited Liability Company					
The en	iclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspon	ndence concerning this matter	to the following:		
		Yosmany Romero Vento			
		Krazy Cuban Flavor LLC	Name of Person		
		2351 Centerstone Lane	Firm/Company		
		Riviera Beach, Florida 334	Address 404		
		Krazycubanflavor@gmail.c	City/State and Zip Code om		
		E-mail address: (to be used for future annual report notific	cation)	
For fu	rther information co	oncerning this matter, please ca	all:		
Yousn	nany Romero Vento		561 843-1810at ()Area Code Daytime	Telephone Number	
	Name of	f Person	Area Code Daytime	Telephone Number	
Enclos	sed is a check for th	ne following amount:			
\$2	5.00 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

Krazy Cuban Flavor LLC		i;
(Name of the Limited I.	iability Company as it now appears on our records.) lorida Limited Liability Company)	
he Articles of Organization for this Limited Liabil	lity Company were filed on	and assigned
lorida document numberL19000167849		
iorida document number	·	
his amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
he new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
Principal office address MUST BE <u>A STREET A</u>	DDRESS)	
Enter new mailing address, if applicable:		
<u>Mailing address MAY BE A POST OFFICE BO</u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·
		
3. If amending the registered agent and/or		ter the name of the
registered agent and/or the new registered office	address nere.	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	Florida	
-	, rionas	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>	Type of Action
AMBR	Lara K Walsh	2351 Centerstone Lane Riviera Beach, FL 33404	□ Add
			■ Remove
			☐ Change
			Add
			Remove
			Change
			Add
			Remove
			Change
			Remove
			Change
			
			Remove
			Change
			□ Remove
			☐ Change

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n Elen	08/01/2019
Note:	(optional) feetive 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Datad	10/30/2019
Dateu	
	Signature of a member or authorized representative of a member
	Yosmany Romero Vento

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Typed or printed name of signee

Filing Fee: \$25.00