

L19 000231645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

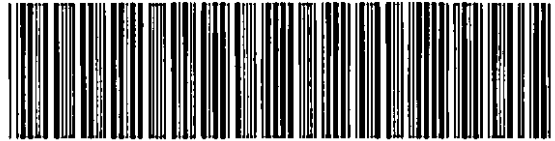
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R. WHITE
JUN 18 2020

2020 JUN 18 11:00 AM

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Name Change Amendment of 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:

Lita Cuen

Name of Person

Kadiddlehopper Services, LLC

Firm/Company

P.O. Box 841

Address

Dover, FL 33527

City/State and Zip Code

Mscuen@hotmail.com

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

For further information concerning this matter, please call:

Lita Cuen

405

898-9700

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 JUN 11 11:10:12

June 3, 2020

LITA CUEN
P.O. BOX 841
DOVER, FL 33527

SUBJECT: KADIDDLEHOPPERS - SLIGHTLY USED CAR RENTALS, LLC
Ref. Number: L19000231645

We have received your document for KADIDDLEHOPPERS - SLIGHTLY USED CAR RENTALS, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There are pages missing from the document. Pages 2-3 must be included.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 020A00010987

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

Kadiddlehoppers - Slightly Used Car Rentals, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on September 13, 2019 and assigned Florida document number L19000231645.

This amendment is submitted to amend the following:

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

Kadiddlehopper Services, LLC

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:

12870 East US Highway 92

(Principal office address MUST BE A STREET ADDRESS)

Dover, FL 33527

Enter new mailing address, if applicable:

P.O. Box 841

(Mailing address MAY BE A POST OFFICE BOX)

Dover, FL 33527

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:

LITA CUEN

New Registered Office Address:

12870 East US Highway 92

Enter Florida street address

Dover

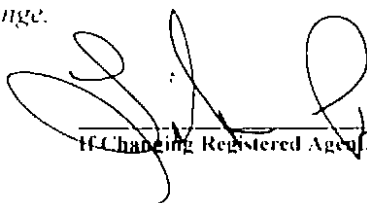
City

Florida 33527

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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

Filing Fee: \$25.00