119000254015

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: Registra Division | tion Section of Corporations |
|--------------------------|--|
| KON | IG RESTORATION DEPOT LLC |
| SUBJECT: | Name of Limited Liability Company |
| The enclosed Artic | les of Amendment and fee(s) are submitted for filing. |
| Please return all co | rrespondence concerning this matter to the following: |
| | Antonio Rios |
| | KONG RESTORATION DEPOT LLC CT: Name of Limited Liability Company losed Articles of Amendment and fee(s) are submitted for filing. sturn all correspondence concerning this matter to the following: Antonio Rios Name of Person Kong Restoration Depot LLC Firm/Company 8371 SW 38th St. Address Miami, FL 33155 City/State and Zip Code antoniorios1113@gmail.com E-mail address: (to be used for future annual report notification) information concerning this matter, please call: |
| | |
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| | |
| | E-mail address: (to be used for future annual report notification) |
| For further informati | on concerning this matter, please call: |
| Antonio Rios | · · · · · · · · · · · · · · · · · · |
| Na | |
| Enclosed is a check f | or the following amount: |
| □ \$25.00 Filing Fee | Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



2019 OCT 24 PM 12: 48

| KONG RESTORATION DEPOT | LLC | |
|---|--|---------------------------|
| (Name of the Limit | ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company) | |
| The Articles of Organization for this Limited Li Florida document number L19000254015 | iability Company were filed on October 9, 2019 | and assigned |
| This amendment is submitted to amend the follo | owing: | |
| A. If amending name, enter the new name of | the limited liability company here: | |
| The new name must be distinguishable and contain the wi | ords "Limited Liability Company," the designation "LLC" or | the abbreviation "L.L.C." |
| Enter new principal offices address, if applica | able: | |
| (Principal office address MUST BE A STREE) | T.ADDRESS) | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B | | |
| If amending the registered agent and/o egistered agent and/or the new registered offi | r registered office address on our records, <u>ice address here</u> : | enter the name of the no |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street address | |
| | . Flor | • • - |
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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 ompany 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 |
|---------------|-------------|-------------------------------------|----------------|
| MGR | Meily Reyes | 8371 SW 38th St. Miami, FL 33155 | ■ Add |
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| ective date, if other than the effective date is listed, the date must te: If the date inserted in this blument's effective date on the De | ock does not meet the appli- | cable statutory titing re | (optional) han 90 days after filing.) Purs quirements, this date will i | suant to 605.020 not be listed a |
| record specifies a delayed he 90th day after the reco | effective date, but no ord is filed. | ot an effective time | e, at 12:01 a.m. on t | he earlier |
| October 23 | 2019 | _ | | |
| <u></u> | | | - | |
| | | / \ | | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00