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COVER LETTER

Tallahassee, FL 32314

TO: Registration S Division of Co			
AKA 03,1	.I.C		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing,	
Please return all corresp	ondence concerning this matter	to the following:	
	Karen A Cohen		
		Name of Person	
	AKA 03, LLC		
		Firm/Company	
	860 Golden Cane Drive		
		Address	202:
	Weston, FL 33327		2023 OCT 17 PM 12: 40
		City/State and Zip Code	
	kac@misterkcorp.com		Pr
		to be used for future annual report notification	on)
For further information of	concerning this matter, please c	all:	0 4
Karen A. Cohen		786 925-3879 at ()	
Name o	of Person		ephone Number
Enclosed is a check for t	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 Addre Registration	Section	Street Address: Registration Section	
Division of C P.O. Box 632		Division of Corpora The Centre of Talla	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

mend the following: new name of the limited liability company here: LLC Id contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." ress, if applicable: BE A STREET ADDRESS) OC DESTRICT OFFICE BOX	AKA 03, LLC		
mend the following: new name of the limited liability company here: LLC Id contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." ress, if applicable: BE A STREET ADDRESS) OC 100 100 100 100 100 100 100 100 100 10	(<u>Name of the Limited Liability Comp</u> (A Florida Limited	oany as it now appears on our records.) Liability Company)	
mend the following: new name of the limited liability company here: LLC Indicontain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." ress, if applicable: BE A STREET ADDRESS) OCT 17 99707 Policable: ST OFFICE BOX)	The Articles of Organization for this Limited Liability Compan	y were filed on May 26, 2020	and assigned
new name of the limited liability company here: LLC Ind contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Tess, if applicable: BE A STREET ADDRESS) OCT OF COORDINATED STORES OF COORDINATED ST	Torida document number 1.20000142073		_
TLLC Indicontain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Tess, if applicable: BE A STREET ADDRESS) OF COMPANY	his amendment is submitted to amend the following:		
ress, if applicable: BE A STREET ADDRESS) OCT OF COMMENS Oplicable: ST OFFICE BOX)	If amending name, enter the new name of the limited lia	bility company here:	
ress, if applicable: BE A STREET ADDRESS) OCT OF INTRO- Oplicable: ST OFFICE BOX) The street address are a street address and a street address are a street address are a street address and a street address are a street address are a street address and a street address are a street address are a street address and a street address and a street address are a st	AKA Restaurant Holding Company, LLC		
BE A STREET ADDRESS) OCT 17 OF COROLLA OR STATE OF STATE	he new name must be distinguishable and contain the words "Limited Liah	oility Company," the designation "LLC" or the	abbreviation "L.L.C."
BE A STREET ADDRESS) COLUMN OF COMMON OF COMM	Inter new principal offices address, if applicable:		
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gent and/or registered office address on our records, <u>enter the name of the ne</u> office address here:	Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the nar	
	Name of New Registered Agent:		
	New Registered Office Address:		
l Agent:		Enter Florida street address	
Address:		Florida	
Address: Enter Florida street address		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.

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Effective date, if other than the date from the date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	e specific and ca k does not me	annot be prior et the applic	able statutor	g or more than y filing requir	(option 90 days after fi ements, this c	al) ling.) Pursuan late will not	t to 605.0 be listed)207 (d as t
e record specifies a delayed effective d d is filed.	ate, but not a	n effective ti	me, at 12:01	a.m. on the e	arlier of: (b)	The 90th da	ay after t	the
Dated October 10	 ;	2023	<u> </u>					
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