LZ0 000185122

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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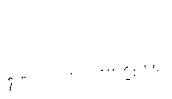
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FLORIDA DEPARTMENT OF STATE **Division of Corporations**

February 11, 2021

STEPHANIE ESPINAL 708 VERONA LAKE DR WESTON, FL 33326

SUBJECT: KIWI LOUNG LLC Ref. Number: L20000185122

We have received your document for KIWI LOUNG LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This document was previously filed on February 3, 2021.

To receive a refund, please submit a written request to the attention of the undersigned. Be sure to include the name of the person or entity the check should be made payable to and the address to which it should be mailed.

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.

Letter Number: 521A00003046

Octavia L Simmons Regulatory Specialist II Supervisor

COVER LETTER

TO: Registration Sco Division of Corp			
SUBJECT:	Kim Lou	nd UC	_ .
The enclosed Articles of a	Amendment and feets) are subn	nitted for filing	
Please return all correspo	ndence concerning this matter to	o the following.	
		hante Espinal	·
	lani.	Loung LLC	
	708 Ver	onalake Dr.	
	Weston Stephanism	City State and Zip Code Management be used for future annual report notific	· Qgmail. Wm
For further information co	oncerning this matter, please cal		
Stephania Name o	e Esphal	at (954) 882-3	3449 Tetephone Number
Unclosed is a check for th	e following amount:		
\$25 00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	7) \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Sou,00 Filing Fee. Certificate of Status & Certified Copy (adamonal 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kim Wing 2041EC 11 AMILI: 26	
(Name of the Limited Liability Company) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on $\frac{1}{200}$ and assigned Florida document number $\frac{12000185122}{2000}$	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here: Liwi Lounge L.L.C. The new name must be distinguishable and contain the words "Limited Fiability Company," the designation "LU" or the abbreviation "LUC".	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) [Principal office address MUST BE A STREET ADDRESS] [Principal office address MUST BE A STREET ADDRESS]	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) MYMMAY FL, 33025	
B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new register agent and/or the new registered office address here</u> :	<u>ed</u>
Name of New Registered Agent: Stephanic Explai	
Name of New Registered Agent: Stephanic Explad New Registered Office Address: 180 SW 82nd terr Enter Florida street address	
Miamar FL3305	

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 = -M; $AMBR = Au$	anager uthorized Member		
<u>Title</u>	Name	Address . 2021 FEB 11 AM11: 26	Type of Action
MGR	Stephanie Espiral	1800 SW 82nd terr	VAdd
		Myamar FL, 3385	IRemove
			le hange
AMBR	Stephanie Epinal	1800 Sw 82nd terr	V/Add
	•	Minamar FL733015	- iRemove
			.jChange
MGR	Kenh Rean	1800 SW 82nd terr	_ Kdd
		Miramor FL,3305	IlRemove
			_ iChange
AMBR	Kerin Rean	1800 SW 82nd terr	V Add
		Miramar FL, 33025	TRemove
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five date, if other the tective date is listed, the	date must be specific.	and cannot be prior to date of film	or more than 90 days after filing.) Tiling requirements, this date y	Pursuant to 6053 will not be lister
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		i a member or authorized represen	tative of a member	

Filing Fee: \$25.00