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COVER LETTER

TO: Registration S Division of Co				
ـ Kiekoff Co	offee Company, LLC	•	•	
SUBJECT:		nited Liability Company		
The analysis Amidee of	· S			
	Amendment and fee(s) are sub	-		
Please return all correspondence	ondence concerning this matter	to the following:		
	Christian Ortiz			
		Name of Person		
	Kickoff Coffee Company,	LLC		
		Firm/Company		· <u>-</u>
	6152 N State Rd 7, Unit 19	03		
		Address		
	Coconut Creek, FL 33073			
		City/State and Zip Cod	e e	
	cortiz17@gmail.com	to be used for future annu-		:>
For further information of	concerning this matter, please c		п тероп постел	ion
Christian Ortiz			066655	
Name o	of Person	at () _ Area Code	Daytime Te	lephone Number
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy radditional copy is e		S60.00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed
<u>Mailing Addre</u> Registration (Address: .ration Sectio	n
Division of C	Corporations	Divisi	on of Corpor	ations
P.O. Box 632	2/	The C	entre of Talla	ahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kickoff Coffee Company, LLC

company has been notified in writing of this change.

2020 AUG 2 | AH 10: 10

(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 July 27, 2020	and assigned
Florida document number 1.20000220637		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company " the designation "LLC" or the ab	breviation "L. I. C."
Enter new principal offices address, if applicable:	6152 N State Rd 7	
(Principal office address MUST BE A STREET ADDRESS)	Unit 103	
	Coconut Creek, FL 33073	
Enter new mailing address, if applicable:	N/A	···
(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: Name of New Registered Agent:	address on our records, enter the nam	,
The state of the s		_
New Registered Office Address:	Enter Florida street address	
	Florida	
	Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my duties, and I am f	amiliar with and

being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

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> 2929 AUG 21 AUTO: 10	Type of Action
MGR	Melissa Ortiz	6152 N State Road 7	= Add
		Unit 103	□Remove
		Coconut Creek, Florida 33073	□ Change
			🗆 Add
			□Remove
			□Change
			🗀 Add
			□Remove
			DChange
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		***	□Remove
			□Change
			□Add
			🗆 Remove
			🗆 Change
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			□Remove
			□ Change

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	c and cannot be prior to date of filing or more than 90 days after filing.) Pursuam to 605,6 not meet the applicable statutory filing requirements, this date will not be listed
cord specifies a delayed effective date, but s filed.	not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
ed August 14th	2020
	7

Typed or printed name of signee