(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:

Office Use Only



600358116806

01/19/21--01004--009 **25.00

3/3/21

COVER LETTER

TO: Registration Section Division of Corpor				
SUBJECT:	Hamz Name of Limi	Kitchen ited Liability Company		
The enclosed Articles of Am	endment and fee(s) are sub-	mitted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
	<u> Komil</u>	Name of Person	50N	
		Firm/Company		
	4176 Inven	Gry Dr Apt	110	
	Lauderhi	City/State and Zip Code	9	
-	E-mail address: (t	to be used for future annual re	port notification)	<u>.</u>
For further information conc	erning this matter, please ca	all: 954-470-61	15	
Hamilt T	nompson	at () Area Code	Daytime Telepho	ne Number
Enclosed is a check for the fo	ollowing 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:	tion	Street Add Registrat	Iress:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

FILED

Komz Kitc'	hon L	2021 JAH 19 PM 5: 43	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears Liability Company)	on our records ECRETARY OF STATE TALLAHASSEE, FL	
	. ^	Janaan	
The Articles of Organization for this Limited Liability Company	were filed on 1	20 20 20 and assigned	
Florida document number <u>L 20000 33200 4</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	bility company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the des	signation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(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	address on our rec	cords, enter the name of the new register	
agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
Now Registered Office Radioge	Enter Florida street address		
		. Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		
l hereby accept the appointment as registered agent and ago provisions of all statutes relative to the proper and complete			

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Mamille Thompson	4176 Inverrary Dr Apt 110	Add
		Lauderhill, FL 33319	
			□Change
MGR	Danielle Dayley	4330 NW 44+h Ave	
		Lauderdaie Laxes, FL 333	319 TRemove
			□Add
			□Remove
			□Change
			□Renюve
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change

								
							· · · · · · · · · · · · · · · · · · ·	
		-					· · · · · · · · · · · · · · · · · · ·	
				. <u></u>	<u> </u>		<u></u>	
								
								
-	· · · · · · · · · · · · · · · · · · ·							
		 		·				
				. <u> </u>		·		
	-							
				<u></u>			<u></u>	
te: If the	ate, if other that date is listed, the d date inserted in effective date on	this block does	not meet the	applicable sta		than 90 days aft	i ional) er filing.) Pursuan nis date will not	it to 605.020 be listed as
union s	cricence date on	те веранте	tor oute 3 to					
cord spec s filed.	rifies a delayed c	ffective date. b	not an effec	ctive time, at	12:01 a.m. on	the earlier of:	(b) The 90th o	lay after the
ed(01-5-2	lam	of a member	or authorized n	epresentative of	a member		
		ス _~	- 11 -		10801 of signee			