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A. RIVERS DEC 2 2 2021



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## **COVER LETTER**

TO:

TO: Registration So Division of Cor					
/Dir//Kwēn					
SUBJECT:		ited Liability Company	<del></del>		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
	ondence concerning this matter	·			
	Stine N Jean				
		Name of Person			
	/Dir/ /Kwēn/ LLC				
		Firm/Company			
	14651 Biscayne Boulevard	i, 213			
		Address			
	Miami, FL 33181				
		City/State and Zip Code	, -, -, -, -, -, -, -, -, -, -, -, -, -,		
	dirkwenco@gmail.com				
For further information c	E-mail address: ( oncerning this matter, please c	to be used for future annual report not all:	ufication)		
Stine N Jean	- '	561 2997445			
Name o	f Person	at () Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	ne 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 Address Registration		<u>Street Address:</u> Registration Se	ection		
Division of C		Division of Co			
P.O. Box 632		The Centre of			
Tallahassee, I	FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

/dir//kwēn/ LLC

(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 /dir//kwēn/ LLC and assigned Florida document number 1.20000333410 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Dear Kwen LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "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 records, enter the name of the new registere agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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 th 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, Lithi comment 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Stine Jean	5.7. 213 Bisenyne Blvd   401 NE 118	Heetsau
		Miam, FL 33161	□Remove
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