

(Requestor's Name) (Address)	400360440934				
(Orty/State/Zip/Phone #) PICK: Jr (Business Entity Name)	02/2:/2i0101d102 **				
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer	2021 FEB 23 PH12: 55				
Office Use Only	79 23 PH 12: 59				

COVER LETTER

	Registration S Division of Co			
eum ir c	Killer Cof	fee Company LLC		
SUBJEC	.1:	Name of Lim	nited Liability Company	
The enclo	sed Articles o	f Amendment and fee(s) are sub	unitted for filing.	
Please ret	um all corresp	ondence concerning this matter	to the following:	
		Derek Suhre		
			Name of Person	 -
		Killer Coffee Company LI	.C	
			Firm/Company	
		5361 NW 32nd St		
			Address	
		Margate, FL 33063		
			City/State and Zip Code	······································
		derek.suhre@gmail.com		
		E-mail address: (to be used for future annual report noti	fication)
For furthe	r information (concerning this matter, please c	all:	
Derck Suhre		859 4453658 at ()		
Name of Person		of Person	Area Code Daytim	e Telephone Number
Enclosed i	is a check for t	he following amount:		
□ \$25.0	0 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	failing Addre		Street Address:	ction
Registration Section Division of Corporations		Registration Section Division of Corporations		
	.O. Box 632		The Centre of T	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(Name of the Limited L	inbility Company as it now appears on our records.) Torida Limited Liability Company)
(A)	Horida Limited Clabitity Company)
he Articles of Organization for this Limited Liabil lorida document number L21000002959	lity Company were filed on 12/23/2020 and assigned
nis amendment is submitted to amend the following	ng:
. If amending name, enter the new name of the	e limited liability company here:
ne new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable	
Principal office address MUST BE A STREET A	
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BO	1X) P1:12:55
3. If amending the registered agent and/or registered and/or the new registered office address had	stered office address on our records, enter the name of the new regis
Name of New Registered Agent:	
Name of New Registered Agent: New Registered Office Address:	Enter Florida street address
	Enter Florida street address Florida Zip Code

ereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the wisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ng filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability apany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

ur removed from our records:

MGR = Manager

AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Derek Suhre	5361 NW 32nd St	■Add
		Margate, FL 33063	
			□Change
AMBR	Jessica Gomez	5361 NW 32nd St	≅Add
		Margate, FL 33063	
			☐ Change
			Add
			□Remove
			□Change
			DAdd
			□Remove
			☐ Change
-			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change

				,		
<u> </u>			 			
					·	
 				<u> </u>		
						
						
•						
						_
						-
<u>. </u>						
ective date, if other than the da	ite of filing:	- :		(option:	al)	
effective date is listed, the date must be e: If the date inserted in this block	specific and cannot be p does not meet the ap	prior to date of oplicable statu	filing or more than tory filing requi	90 days after fili rements, this da	ng.) Pursuant to 60: ite will not be list	5.020 ed as
ument's effective date on the Depa	rtment of State's reco	ords.				
ord specifies a delayed effective dilled.	ate, but not an effective	ve time, at 12	:01 a.m. on the c	arlier of: (b)	The 90th day afte	r the
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
February 16th	2021					
\bigcap ,		·				
P W						
Sig	mature of a member or a	authorized repr	esentative of a me	moer		

Filing Fee: \$25.00