## L21000040598

(Re	equestor's Name)	-
(Ad	ldress)	-
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(Cit	ty/State/Zip/Phone	e #)
☐ PICK-UP	☐ WAIT	MAIL
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(LO	cument Number)	
Certified Copies	_ Certificates	of Status
Canadal Instructions to	Elica Office	
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

TO: Registration Division of C		·		•
NORTH SUBJECT:	SHORE KAVA LLC		••	
SUBJECT:	Name of Li	mited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corres	pondence concerning this matte	r to the following:		
	KEVIN BRANDA			
	110	Name of Person		
	NOTH SHORE KAVA L	LC		
		Firm/Company		
	307 SPRING TRAIL			
		Address		
	WEST PALM BEACH, F	L. 33410		
	KEVINBRANDA@HOTN	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
		to be used for future annual report not	tification)	
For further information	concerning this matter, please of	all:		
KEVIN BRANDA		863 212-1992		
Name	of Person	Area Code Daytin	ne Telephone Number	<del></del>
Enclosed is a check for	the following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Camidad C	of State & T ppy is end seed)
Mailing Addre Registration Division of O P.O. Box 63. Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 7 2415 N. Monro Tallahassee, FL	rporations  Callahassee  Street, Suite 810	A 2:13

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NORTH SHORE KAVA LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lii	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited Liability Com Florida document number L21000040598	npany were filed on JANUARY 8, 2021	and assigned
his amendment is submitted to amend the following:		
a. If amending name, <u>enter the new name of the limited</u>	I liability company here:	
the new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	<u> </u>	
nter new mailing address, if applicable:		<del></del>
Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered of gent and/or the new registered office address here:	fice address on our records, <u>enter the nam</u>	ne of the new registe
Name of New Registered Agent:		<b>P</b>
New Registered Office Address:		2021
	Enter Florida street address	- <del></del>
	, Florida	29
	City	Zip Code
ew Registered Agent's Signature, if changing Registered A	gent:	

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 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>	Name	<u>Address</u>	Type of Action
MGR	PAULINA BRANDA	4228 COQUINA WINDS WAY, GREENACRES FL	□Add
		33463 UN	<b>=</b> Remove
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			□Remove
		<del></del>	□Change
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source is effective date on the is	partment of State 5 (ccorus.			> 177
record specifies a delayed effectiv	date but not an effective time	at 12:01 a m. on the conti	N	. <b>O</b>
is filed.	date, out not an encenve fiffe	, at 12.01 a.m. on the earn	ler of: (b) / The $\frac{76}{4}$	an day after the
MARCH 26	2021			
	<i></i>	100		
	Signature of a member or authoriz	J. 13-1	-	
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Filing Fee: \$25.00