## L22000010345

•
(Requestor's Name)
(Address)
(Address)
. ,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Warre)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700380778667

02/01/22--01022--011 \*\*30.00



O SIMMONS FEB 1 1 2022

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Sillouth Kitchen and Bath Design Ll Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Brandis Houckos Name of Person
SMOOTH KITCHEN and Buth Usign
68 Rullins lane Palm Coast Fl
Palin Coast FL 32164  City/State and Zip Code  Smooth Ki Jehun and bath design & gmail. Core  E-mail address (to be used for future annual report notification)
E-mail address (to be used for future annual report notification)
For further information concerning this matter, please call:
Brandis Kackus at (660) 888-2813 Area Code Daytime Telephone Number
Enclosed is a check for the following amount
□ \$25,00 Filing Fee

### Mailing Address:

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

Street Address: 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

2022 FEB - 1 AM 6: 59

	20221 C	<b>5</b>	
(Name of the Limited Liability Comp.	inv as it now appears on o	ar records) = STATE	
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	Liability Company (2017)		
The Articles of Organization for this Limited Liability Company	were filed on A.A.	04 7022 and assigned	
The Atticles of Organization for this Enumed Flathing Company	were med on Joins	DI DOCE and assigned	
Florida document number <u>L2700010 345</u> .			
This amendment is submitted to amend the following:			
This anchancia is submitted to anicia 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 Liab	Lan Company " the Jacobs	non 1911 (122) or the abbraryation 1911 (122)	
The new name must be distinguishable and contain the words. Chinica 1540	my Company, the designar	and LLC of the detrievation 1, 1.3.	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Triniput office marcis Prost BE TSTREET TOORERS			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
(Stating dairess BEAT BE A TOST OF TICL BOX)			
B. If amending the registered agent and/or registered office	address on our record	s, 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:			
	Emer Florida sir eet address		
		Florida	
	Cuy	Florida Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>-</u>		
I hereby accept the appointment as registered agent and ag			
provisions of all statutes relative to the proper and complete			
accept the obligations of my position as registered agent as			
being filed to merely reflect a change in the registered office	<sup>r</sup> uddress. I hereby con	firm that the limited liability	
company has been notified in writing of this change.			
If Cha	nging Registered Agent. Si	gnature 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>	Type of Action
AMBR_	Brandis Kockos	68 Rollins lane Palm Coa	st Wade AS sole Me
			□Remove
MGR	Erivelton Campos	68 Rollins lane Palm Coast FI	3216 4 □Add
		Remove as member	
		change to Auth Rep/Manager on	Lectionge
			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			⊟Change
<del>,-,-</del> -			□Add
			□Remove

	ation, enter change(s) here: (Attach additional sheets, if necessary.)
I failed	to list myself Brandis Kuckos as
the sole	number of My UC - smooth kitchen
,	and made a mistake by listing
, ,,	Unipos as a member when trying
to list hiv	n as an authorized representative or
manager o	but not as an owner or member.
- Jan try	1 ng to and myself as the sole proper
Ot my L	
·	
Effective date, if other than the If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 (3)(b) block does not meet the applicable statutory filing requirements, this date will not be listed as the
e record specifies a delayed effect rd is filed.	ive date, but not an effective time, at 12.01 a.m. on the earlier of; (b). The 90th day after the
Dated $1/25/2$	<u>022.</u>
BeN/i	Signature of a member of authorized representative of a member
Rona	1'= Kalka C

Filing Fee: \$25.00