haz coccatage

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(Business Entity Name)
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2022 FEB 22 AM 9: 30 SECRETARY OF STATE

دد داراء ما

COVER LETTER

TO:

Registration Section

Division	of Corporatio	ons		
KAC	QUI, L.L.C.			
SUBJECT:		Name of Lim	ited Liability Company	
			•	
The enclosed Artic	cles of Amend	ment and fee(s) are sub	mitted for filing.	
Please return all co	orrespondence	concerning this matter	to the following:	
	KA	RLIN SANCHEZ		
			Name of Person	
			Firm/Company	<u> </u>
	224	4 NE 173 RD ST APT	16	
	-		Address	
	NO	RTH MIAMI BEACH		
			City/State and Zip Code	
	KEL	ENASANCHEZ@HO	TMAIL.COM to be used for future annual report not	(Carrina)
For further inform	ation concerni	ng this matter, please c		meanou)
KARLIN SANCE			305 833-2703	
		at ()	7° 1 1 1 1	
	Name of Person		Area Code Daytin	ne Telephone Number
Enclosed is a chec	k for the follo	wing amount:		
■ \$25.00 Filing		30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing /</u> Registra	Address: ation Section	1	<u>Street Address:</u> Registration Sc	ection
Division of Corporations		Division of Co	rporations	
P.O. Bo		1.4	The Centre of	
Tallaha:	ssee, FL 323	14	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 FEB 22 AM 9: 31

KAQUI	, L.L.C.	2000-	
(Name of the Limited Liability Compa (A Fforida Limited)	iny as it now appears on our records.) Liability Company)	SECRETARY OF STATE TALLAHASSEE, FL	
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000040496</u> .	were filed on 01/21/2022	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	2244 NE 173 RD ST APT 16		
(Principal office address MUST BE A STREET ADDRESS)	NORTH MIAMI BEACH, FL 33	3160	
Enter new mailing address, if applicable:	2244 NE 173 RD ST APT 16		
(Mailing address MAY BE A POST OFFICE BOX)	NORTH MIAMI BEACH, FL 33	8160	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter Florida street address		
	Flor	ida Ziv Code	
	CNV	zq) с оае	

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 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
DIR	KARLIN K SANCHEZ	2244 NE 173 RD ST APT 16	
		NORTH MIAMI BEACH, FL 33160	≣Remove
			□Change
AMBR	KARLIN E SANCHEZ	2244 NE 173 RD ST APT 16	= Add
		NORTH MIAMI BEACH, FL 33160	□Remove
			□Change
MGR	FELIX F QUINO. SR	1435 NE 176 ST	□ Add
		NORTH MIAMI BEACH, FL 33160	Remove
			□Change
AMBR	FELIX QUINO	1435 NE 176 ST	≣Add
		NORTH MIAMI BEACH, FL 33160	Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

ii amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
_		
_		
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_	<u> </u>	
Note: 11	e date, if other than the date of filing:	207 (Las 1
e record rd is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	he
Pated _	EBRUARY 17 2022	
	Signature of a member or authorized representative of a member	
	KARLIN SANCHEZ Typed or printed name of signee	

Filing Fee: \$25.00