

W220000063106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

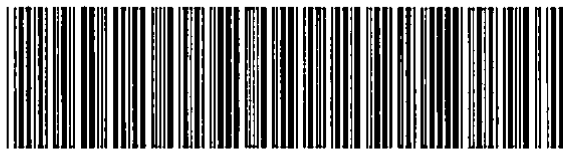
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07/25/22--01017--004 **25.00

2022 JUL 25 11:03

COVER LETTER

Registration Section
Division of Corporations

SUBJECT: Cafe Krewe 22 of Port St. John, LLC
Name of Limited Liability Company

enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Delatron Johnson

Name of Person

Cafe Krewe 22 of Port St. John, LLC

Firm/Company

6693 North US-1-S

Address

Cocoa, Florida 32927

City/State and Zip Code

cafekrewe22@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Delatron Johnson

Name of Person

at (321) 536-4421

Area Code

Daytime Telephone Number

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)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

2022 JUL 15 11:03

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Cafe Krewe 22 of Port St. John LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 2/7/2022 and assigned
Florida document number L22000063106.

This amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

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)

If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

Now 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

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
removed from our records:

GR = Manager

MBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
GR	Latoya Dejesus	3718 Chambers Lane	<input type="checkbox"/> Add
		Unit 7	<input checked="" type="checkbox"/> Remove
		Cocoa, Fl. 32926	<input type="checkbox"/> Change
GR	Hector Dejesus	3718 Chambers Lane	<input type="checkbox"/> Add
		Unit 7	<input checked="" type="checkbox"/> Remove
		Cocoa, Fl. 32926	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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2022-03-25 11:03

2022-11-03 11:03

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

the record 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 record is filed.

Dated July 21 . 2022 .

William Johnson
Signature of a member or authorized rep

Signature of a member or authorized representative of a member

DeLafron Johnson

Typed or printed name of signee