

# L22000173191

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

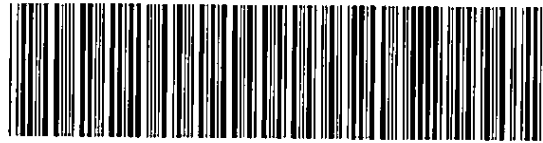
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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2022 SEP 19 AM 11:56  
TALLAHASSEE, FL

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2022 SEP 19 AM 9:43  
TALLAHASSEE, FL



**COGENCYGLOBAL**

115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
**866.625.0838**  
COGENCYGLOBAL.COM

Date: **September 19, 2022**

Account#: I200000000088

Name: **KEN**

Reference #: **1787465**

Entity Name: **KIK LOANS LLC**

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ **Change of Agent**

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

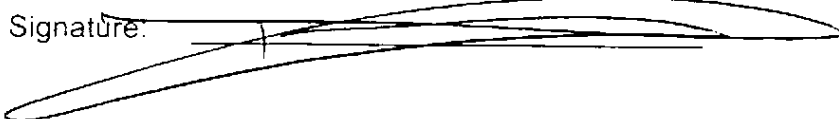
☐ Other \_\_\_\_\_

**ISSUES? CALL**

**KEN:**

**518-213-0738**

Authorized Amount: **\$25.00**

Signature: 

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: KIK LOANS LLC  
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:

ROMULO ROMA

Name of Person

KIK LOANS LLC

Firm/Company

2255 Glades Road, Suite 324A

Address

Boca Raton, FL 33431

City/State and Zip Code

romepower@gmail.com

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

For further information concerning this matter, please call:

Romulo Roma

Name of Person

at (978) 968-8511

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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

**KIK LOANS LLC**

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

**FILED**  
2022 SEP 19 AM 9:43  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 04/11/2022 and assigned  
Florida document number L22000173191.

This amendment is submitted to amend the following:

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

The 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)**

2255 Glades Road

Suite 324A

Boca Raton, FL 33431

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. 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:

Cogency Global Inc

New Registered Office Address:

115 North Calhoun Street, Suite 4

*Enter Florida street address*

Tallahassee

, Florida

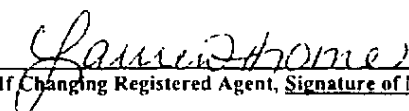
32301

*City*

*Zip Code*

**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.*

 Assistant Secretary  
If Changing Registered Agent, Signature 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>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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ALLAHSEED, S. 10/17/70

2022 SEP 19 AM 9:43  
SALT LAKE CITY

100

**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.

Dated SEPTEMBER 16, 2022

Romulo Roma

Typed or printed name of signee