

122000201970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

2022 SEP 19 AM 11:26

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CITY NATIVE 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:

KRISTOPHER PILLES

\_\_\_\_\_  
Name of Person

CITY NATIVE LLC

\_\_\_\_\_  
Firm/Company

250 NW 23RD STREET - UNIT 412

\_\_\_\_\_  
Address

MIAMI, FL 33127

\_\_\_\_\_  
City/State and Zip Code

KRIS@PILLES.COM

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

For further information concerning this matter, please call:

KRISTOPHER J PILLES

516 449-2783

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2022 SEP 19 PM 1:11

September 1, 2022

KRISTOPHER PILLES  
250 NW 23RD STREET  
UNIT 412  
MIAMI, FL 33127

SUBJECT: CITY NATIVE LLC  
Ref. Number: L22000201970

We have received your document for CITY NATIVE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 522A00019568

*Signed per your request*

*Please Process ASAP. Thank you,*

*Kristopher Pilles*

*SK 9/17/22*

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

**FILED**

2022 SEP 19 AM 11:26

CITY NATIVE LLC

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

S-1  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on APRIL 28, 2022 and assigned  
Florida document number L22000201970.

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)**

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:

KRISTOPHER J. PILLES

New Registered Office Address:

250 NW 23RD STREET - UNIT 412

*Enter Florida street address*

MIAMI

*City*

, Florida 33127

*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.*

  
**If Changing Registered Agent, Signature of New Registered Agent**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**


[illegible]

2007 SEP 19 AH 11:25  
SECRETARY  
WALLAHABSHAH

FILED  
2007 SEP 19 AM 11:26  
SOUTHERN DISTRICT OF CALIFORNIA  
FALLBANK, CALIF.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If 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.

  
Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee- \$25.00**