

L22000254607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

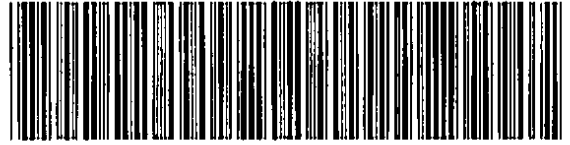
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2022 AUG 17 PM 2:48  
DIVISION OF CORPORATION

# ZARCO EINHORN SALKOWSKI BRITO

ATTORNEYS AT LAW

2 S. BISCAYNE BOULEVARD  
34TH FLOOR  
MIAMI, FLORIDA 33131

ROBERT ZARCO  
ROBERT M. EINHORN  
ROBERT F. SALKOWSKI\*  
ALEJANDRO BRITO  
HIMANSHU M. PATEL  
KAARI-LYNN S. GAGNON  
MICHAEL D. BRAUNSTEIN  
BRENDA PHANG  
MARY NIKEZIC\*\*  
CECILIA S. HERNANDEZ  
JACKY BEDA

MIAMI  
TELEPHONE (305) 374-5418  
TELEFAX (305) 374-5428

WEST PALM BEACH  
TELEPHONE (561) 721-2861

WWW.ZARCOLAW.COM

\*ALSO ADMITTED TO PRACTICE IN NJ  
\*\*ALSO ADMITTED TO PRACTICE IN ILLINOIS

August 16, 2022

## Via Federal Express

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

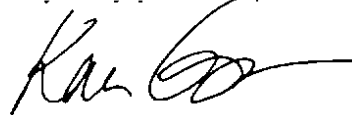
Re: AKA Orlando Holding LLC - Articles of Amendment to Articles of Organization

To whom it may concern:

Please find enclosed Articles of Amendment to Articles of Organization of AKA Orlando Holding LLC and a check in the amount of \$25 for the filing fee.

Should you have any questions, please do not hesitate to contact me.

Very truly yours,



KAARI GAGNON

Encl.

22 AUG 17 PM 2:48  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: AKA ORLANDO HOLDING 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:

Kaari Gagnon, Esq.

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

Zarco Einhorn Salkowski & Brito, P.A.

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

2 S. Biscayne Blvd., Suite 3400

\_\_\_\_\_  
Address

Miami, FL 33131

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

kgagnon@zarcolaw.com

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

For further information concerning this matter, please call:

Kaari Gagnon

305

374-5418

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

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STATE  
DIVISION OF CORPORATIONS

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

AKA ORLANDO HOLDING LLC

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

The Articles of Organization for this Limited Liability Company were filed on June 3, 2022 and assigned  
Florida document number L22000254607.

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)

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DIVISION OF CLERK OF COURT

**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:

New Registered Office Address:

*Enter Florida street address*

\_\_\_\_\_, Florida \_\_\_\_\_  
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.*

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>
MGR	Karen Cohen	860 Golden Cane Drive, Weston, FL 33327	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Alberto Strulovic	860 Golden Cane Drive, Weston, FL 33327	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Andres E. Garcia	860 Golden Cane Drive, Weston, FL 33327	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Karen Cohen	860 Golden Cane Drive, Weston, FL 33327	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Alberto Strulovic	6000 Island Blvd., Apt 501, Aventura, FL 33160	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Andres E Garcia	3898 NW 52nd St., Boca Raton, FL 33496	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

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STATE OF FLORIDA  
DIVISION OF CORRECTIONS

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22 AUG 17 PM 2:48

DIVISION OF CHILD-CARE

(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.

Dated August 15, 2022

Karen Cohen, authorized representative of member

Typed or printed name of signee

**Filing Fee: \$25.00**