# L22000257041

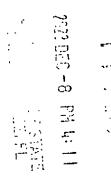
(Requestor's Name)
(Address)
(Address)
(Addison)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Linky Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





100420010071

12/08/23--01021--017 \*\*35.00



RICH Y



December 4, 2023

Attn:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Articles of Amendment to Articles of Organization for KICKPOINT

GOLF LLC.

Florida Document # L22000257041

To Whom It May Concerns,

My office is submitting this Articles of Amendment to Articles of Organization for our client, Kickpoint Golf LLC, assigned with Florida Document # L22000257041. You will find the Cover Letter, Articles of Amendment and the required check, no. 1289, in the amount of \$25.00 within this mail. At your earliest convenience, we request your review of this Articles of Amendment to be submitted for filing. Thank you for your assistance in this matter.

Sincerely,

Aprila Stojkovick Office Manager Florida Entrepreneur Law, P.A.

cc: MKS/ALD

Encl: Deposit Slip; Check # 1289

Florida Entrepreneur Law, P.A. 101 NE 3<sup>RO</sup> AVE, STE, 1500 Fort Lauderdale, FL 333301 Office: (954)80040484 Direct: (954)997-4266

aprila@floridaentrepreneurlaw.com http://Floridafintrepreneurl.aw.com

## **COVER LETTER**

TO: Registration S Division of Co			
CUB IDOT.		KICKPOINT GOLF LLC	;
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are suf	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		JUAN C. ZIGHELB	OIM
		Name of Person	· · · · · · · · · · · · · · · · · · ·
		KICKPOINT GOLF	LLC
	·	Firm-Company	·
		1965 S. Oak Have	en Circle
		Address	
		MIAMI BEACH, FL	33139
		City/State and Zip Code	
	KICKPOINT GOLF LLC  Name of Limited Liability Company  ticles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following:  JUAN C. ZIGHELBOIM  Name of Person  KICKPOINT GOLF LLC  Firm-Company  1965 S. Oak Haven Circle  Address  MIAMI BEACH, FL 33139  City/State and Zip Code  jz@kickpointgolf.com  E-mail address: tto be used for future annual report notification)  mattion concerning this matter, please call:  JUAN C. ZIGHELBOIM  Name of Person  Area Code  Daytime Telephone Number 11  23  24  25  26  26  27  28  28  28  28  28  28  28  28  28		
	E-mail address:	to be used for future annual report n	otification)
For further information of	concerning this matter, please c	all:	
JUA	AN C. ZIGHELBOIM		~ <b>1</b>
Name (	of Person	Area Code Dayt	ime Telephone Number
Enclosed is a check for t	he following amount:		· . · · · ·
\$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

### 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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	KICKPOINT GOL	_F LLC			
( <u>Name of the Limited</u> (A	d Liability Company as it now appears A Florida Limited Liability Company)	on our records.)			
The Articles of Organization for this Limited Lia	· · ·	JUNE 6, 2	2022 aı	nd assig	ned
Florida document numberL220002570	<del></del> '				
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	the limited liability company here	<u>e</u> :			
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the des	ignation "LLC" or the	abbreviati	ion "L.L.C	<del></del>
Enter new principal offices address, if applical	ble:	<del>, .==</del> :		<del></del>	_ <b>_</b>
(Principal office address MUST BE A STREET	ADDRESS)				
					-
Enter new mailing address, if applicable:					
Mailing address MAY BE A POST OFFICE B	<u>OX)</u>				
			-		
B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office address on our rec	ords, <u>enter the na</u>	<u>ame of th</u>	e new r	egister
agent and/or the new registered office address	nere;		. ;	£33	ear and
Manna of New Designand Come			1,		3 1
Name of New Registered Agent:			<u> </u>	<del>0</del> 0	:
New Registered Office Address:		<u>.</u>	, .	-77	, ; ;
	Enter Floride	a street address		ت. بر	
		, Florida _		<del>-</del> ,	
	City		Zipv	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 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>	Address	Type of Action
AMBR	ALEXANDER HA	1440 LOMA VISTA DR.	□Add
		BEVERLY HILLS, CA 90210	Remove
			Change
			□Add
			Remove
			Change
		BEVERLY HILLS, CA 90210	□Add
		<del></del>	
		<del></del>	□Change
			Add
		:	OCHange
			□Remove
			Change
			🗀 Add
			□Remove
			Change

·					, . <del></del>	<del>-</del>	
					· · · · · · · · · · · · · · · · · · ·		
	-					<del></del>	
	_						
			= := =				
		<u>,                                      </u>	<u> </u>			<del></del>	
		<u>.</u>				- 2	
						2023	t= :
						333	
			·		·•	ထ	
ective date	e, if other than the date of	'tilina•			(optional); \(\gamma\)	PH	
i effective da	ite is fisted, the date must be speci	fic and cannot be pr		g or more than 90 day	ss after filing.LPu	rsuant 10 605.0	
<u>te:</u> If the d cument's ef	ate inserted in this block does Tective date on the Departmet	not meet the app nt of State's recor	licable statutor ds.	y filing requiremen	ts, this date জুট	hnot beliste H	d as
	·					•	
	Tes a delayed effective date, b	ut not an effective	e time, at 12:01	a.m. on the earlier	of: (b) The 90	Oth day after	the
s filed.							
ed	NOVEMBER 17	2023	·				
. 7	Juan C. Zighelboim						
		e of a member or as	thorized represen	native of a member			
	·/·gimuii		•				