

L22000268234

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

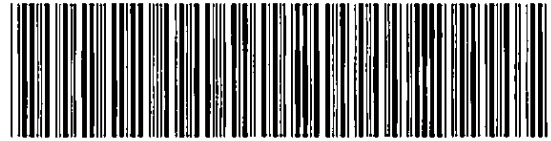
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200396447682

2022 OCT 31 PM 9:31

10/31/2022 10:00:00 AM

2022 OCT 31 AM 9:03

10/31/2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Elegant kinks 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:

Tiara Williams
Name of Person

Firm/Company

P.O. Box 17643
Address

Tampa FL 33682
City/State and Zip Code

tiara.greene2015@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tiara Williams at 352 815-6126
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2022 OCT 31 AM 9:31

Elegant Kinks 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 6/13/2022 and assigned Florida document number L22000268234.

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)

~~1005 W Busch~~ TH
1005 W Busch Blvd ste 106
Tampa FL 33612

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O Box 17643
Tampa FL 33682

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:

Tiara Williams

New Registered Office Address:

1005 W Busch Blvd ste 106

Enter Florida street address

Tampa

City

Florida

33612

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 | Tiara Williams | P.O Box 17643 | <input checked="" type="checkbox"/> Add |
| | | Tampa FL 33682 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | Dew It Today | 3313 E Comanche Av | <input type="checkbox"/> Add |
| | | Tampa FL 33592 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | Tiara Greene | | <input type="checkbox"/> Add |
| | | 11805 Lincoln Street | <input checked="" type="checkbox"/> Remove |
| | | Thonotosassa FL 33592 | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
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[illegible]

(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

Signature of a member or authorized representative of a member

Tara Williams
Typed or printed name of signee

Typed or printed name of signee

Filing Fee: \$25.00