201603C

(Re	equestor's Name)	
(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:		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

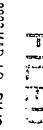
1





900404124309

03/10/23--01005--026 **25.00



COVER LETTER

Div	ision of Corp	orations		•
		LOUNGE, LLC		•
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed	d Articles of A	amendment and fee(s) are subt	mitted for filing.	
Please returr	all correspon	dence concerning this matter	to the following:	
		QUEWAYNE BOLT	Name of Person	
		KINGSTON LOUNGE, LLC	Firm/Company	<u> </u>
		PO BOX 641104	Address	
		Magmil, FL, 33164	City/State and Zip Code	
For further i	nformation co	E-mail address: (to be used for future annual report no	olification)
QUEWAY		, ,	305 927-8784 at ()	
	Name of	Person	Area Code Dayti	ime Telephone Number
Enclosed is	a check for the	e 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)
	niling Address		Street Address: Registration S	
Di	vision of Co D. Box 6321	orporations	Division of C The Centre of	f Tallahassee
Та	Hahassee, F	L 32314	2415 N. Mon	roe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KINGSTON LOUNGE, 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 01/06/2023 and assigned Florida document number L23000016030 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: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida _

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

Title	<u>Name</u>	Address	Type of Action
MGR	QUEWANYE BOLT	PO BOX 641104, Miami, FL 33164	🗃 Add
			□ Remove
			□Change
			□Add
			□Remove
		Change SE CRETA	□ Change SECR AND
			SECRETARY OF SHORE
			Change
			□ Remove
			□Change
	 	·	□ Add
			□ Remove
			□Change
_ 			□Add
			□Remove
			57

 .	-						
		·					
					 		
 				-			
							
	*	-		<u> </u>			
					·		
 -					S	20	
					<u> </u>	2023 1	
					RET	TAR .	ا تعد، ا
-					TARY AHAS	0	44541
		-			<u> </u>		ا الم
					$\hat{\omega}_{\Omega}$	15:	T. HELL
					P.IE	5	
	······································			-			
			<u>-</u>		<u></u>		
ective date	if other than the date	of filings		,			
effective date	is listed, the date must be so	ecific and cannot be pri	or to date of filing	or more than 90 days	optional) after filing.) Pursu	ant to 605.0	020
ie: ii ine dat	e inserted in this block dective date on the Departr	oes not meet the appl	icable statutory	filing requirements	, this date will n	ot be listed	d as
	·						
cord specifie	s a delayed effective date	, but not an effective	time, at 12:01 a	.m. on the earlier o	f: (b) The 90th	day after	the
s filed.	·				1. (0) 1110 7011	day arter	HIE
ed	March 07	. 2023	·				
		- I	- A				
		QueWayn ure of a member of aut	e Bolt				
	Signal	ure of a member of aut	horized represents	ative of a member			

Filing Fee: \$25.00