

L23000034320

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NUMBER 16, 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:

Kathleen A. Kadyszewski

Name of Person

Murphy Reid, LLP

Firm/Company

1100 U.S. Highway One, Ste 401

Address

Palm Beach Gardens, FL 33408

City/State and Zip Code

mmakhoul@murphyreid.com

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

For further information concerning this matter, please call:

Mireille M. Makhoul

561 355-8800
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

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

NUMBER 16, 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 January 18, 2023 and assigned
Florida document number L23000034320

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CIC and KLC Holdings, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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

_____, 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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

Item	Quantity	Unit Price	Total Price	Action
Item 1	10	100	1000	☐ Add
Item 2	20	200	4000	☐ Remove
Item 3	30	300	9000	☐ Change
Item 4	40	400	16000	☐ Add
Item 5	50	500	25000	☐ Remove
Item 6	60	600	36000	☐ Change
Item 7	70	700	49000	☐ Add
Item 8	80	800	64000	☐ Remove
Item 9	90	900	81000	☐ Change
Item 10	100	1000	100000	☐ Add
Item 11	110	1100	121000	☐ Remove
Item 12	120	1200	144000	☐ Change
Item 13	130	1300	169000	☐ Add
Item 14	140	1400	196000	☐ Remove
Item 15	150	1500	225000	☐ Change

