

L23000064872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

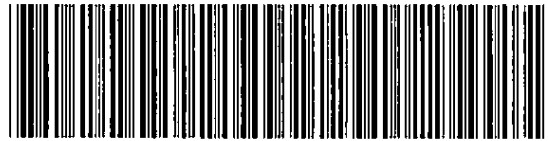
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23 DEC 15 PM 3:48  
ALL AMERICAN STATE  
NOTARY PUBLIC FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TK DELI AND FOOD 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:

HAKIM JONES

Name of Person

TK DELI AND FOOD LLC

Firm/Company

433 RED DAHLIA LN

Address

JACKSONVILLE FL 32218

City/State and Zip Code

YUNGHOFFA718.HJO@GMAIL.COM

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

For further information concerning this matter, please call:

HAKIM JONES

Name of Person

at (904)

Area Code

616-3424

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

TK DELI AND FOOD LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
23 DEC 15 PM 3:48  
CLERK OF CIRCUIT COURT  
STATE OF FLORIDA

The Articles of Organization for this Limited Liability Company were filed on Feb 03, 2023 and assigned  
Florida document number L23000064872

This amendment is submitted to amend the following:

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

TK BODEGA LLC  
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

City Florida 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

•

**AMBR = Authorized Member**


[illegible]

[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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated DEC 21, 2023

  
Signature of a member or authorized representative of a member

Hakim Jones  
Typed or printed name of signee