

L23000087159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 13, 2023

ROGER J CANALES
KAIKO INVESTMENTS LLC
452 SW 158TH TERRACE APT 201
PEMBROKE PINES, FL 33027

SUBJECT: KAIKO INVESTMENTS LLC
Ref. Number: L23000087159

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FILE

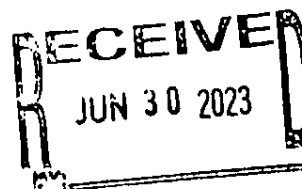
We have received your document for KAIKO INVESTMENTS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$30.00.

The fee to file your limited liability company document is \$25. Please include an additional \$30 for each certified copy (optional) requested and an additional \$5 for each certificate of status (optional) requested.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Antoinette A Gonzalez
Regulatory Specialist II

Letter Number: 323A00013319



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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KAIKO INVESTMENTS 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:

ROGER J CANALES

Name of Person

KAIKO INVESTMENTS LLC

Firm/Company

452 SW 158TH TERRACE APT 201

Address

PEMBROKE PINES, FLORIDA 33027

City/State and Zip Code

ROCATAXOFFICE@GMAIL.COM

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

For further information concerning this matter, please call:

ROGER J CANALES

786 267-3702
at ()
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

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

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

KAIKO INVESTMENTS 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 02/16/2023 and assigned
Florida document number L23000087159.

This amendment is submitted to amend the following:

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

SAME NAME

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:

SAME ADDRESS

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

SAME ADDRESS

(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:

SAME AGENT

New Registered Office Address:

SAME 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

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	JORGE E DUQUE ALMANYA	452 SW 158th TERRACE # 201	<input checked="" type="checkbox"/> Add
		PEMBROKE PINES, FLORIDA. 33027	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	GLORIA I CANALES	452 SW 158th TERRACE # 201	<input checked="" type="checkbox"/> Add
		PEMBROKE PINES, FLORIDA. 33027	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[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.

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.

Dated APRIL 21st 2023

Signature of a member or authorized representative of a member

ROGER J CANALES (REGISTERED AGENT)

Typed or printed name of signee

2023 JUN 30 AM 11:57