# L23000275056

	(Requestor's Name)		
	(Address)		
	(Address)		
	,		
	(6) (6) (7) (8)	<del></del>	
	(City/State/Zip/Phone #)		
PICK-U	P ☐ WAIT	MAIL	
	(Business Entity Name)	<del></del>	
	(Document Number)		
	(Document Number)		
Certified Copies	Certificates of	Status	
Special Instructions	to Ciling Officer		
Special instructions	s to Filing Onicer,		
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Office Use Only



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#### COVER LETTER

			COVEREDITE	`	
	gistration Sec vision of Corp		,	<b></b>	
CUDIFOR	KINCHO AI	RGENTINIAN LLC	'₩		
SUBJECT:		Name of Lim	nited Liability Company		
The enclose	d Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspon	dence concerning this matter	to the following:		
		VEGA, EMILIO E			
			Name of Person		<del></del>
		KINCHO ARGENTINIAN	N LLC		
			Firm/Company		
		425 NE 22ND ST APT 100	03		
			Address	<u>-</u>	<del></del>
		MIAMI, FL, 33137			
			City/State and Zip Code		
		kinchogrillfoodtruck@gmai			
		E-mail address: (	to be used for future annual re	eport notification)	<del></del>
For further i	nformation co	ncerning this matter, please ca	all:		
Lianet Corra	ıles		786 7634 at ()	4193	
	Name of Person Area Code Daytime Telephone Number		ne Number		
Enclosed is a	a check for the	following amount:			
□ \$25.00 I	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	osed)	\$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

KINCHO ARGENTINIAN LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records. Liability Company)	)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L23000275056}{L23000275056}$	y were filed on <u>08/30/2023</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	425 NE 22ND ST APT 1003	
Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL. 33137	
Enter new mailing address, if applicable:	425 NE 22ND ST APT 1003	2023
Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL. 33137	SEP T
		<u> </u>
3. If amending the registered agent and/or registered office	address on our records, enter the	he name of the new registere
gent and/or the new registered office address here:		平 m 38
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 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>	Address	Type of Action
AMBR	SALAZAR, PAULA A	6208 HOMELAND RD	
		LAKE WORTH, FL 33449	Remove
			□Change
AMBR	CORRALES, LIANET	425 NE 22ND ST APT 1003	<b>≡</b> Add
		MIAMI, FL, 33137	□ Remove
			□Change
<del></del>	<del></del>		□Add
			□ Remove
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			🗆 Add
			□Remove
			□Change
		<del></del> .	□Add
			□ Remove
			□ Change

any othe	er information, enter change(s) here: (Attach additional sheets. if necessary.)
(f amending any othe	
_	
	(optional)  if other than the date of filing:  e 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 to 18 to
E. Effective date (If an effective dat Note: If the da	if other than the date of filing:  e is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 603.0207 to e is listed, the date must be specific and cannot be prior to date of filing requirements, this date will not be listed as the inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the fective date on the Department of State's records.
document's eff	the inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in this block does not meet the appropriate inserted in the appropriate inserted in the appropriate inserted in the appropriate inserted in the appropriate in the appropriate inserted in this block does not meet the appropriate inserted in the appropriate in the approp
	Tes a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
If the record specific record is filed.	162 a gents -
	1, 30
_	Signature of a member or authorized representative of a member
`	VEGA, EMILIO E  Typed or printed name of signce

## **COVER LETTER**

TO:

Registration Section

Division of Cor	rporations			
KINCHO /	ARGENTINIAN LLC			
SUBJECT:	Name of Lim	ited Liability Company	-	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	-	-		
	VEGA, EMILIO E			
		Name of Person	<del></del>	
	KINCHO ARGENTINIAN	N LLC		
		Firm/Company		
	425 NE 22ND ST APT 10	03		
		Address		
	MIAMI, FL. 33137			
		City/State and Zip Code		
	kinchogrillfoodtruck@gmai	H.com to be used for future annual report not	ifications	
For further information c	oncerning this matter, please c			
	oneering the matter, preuse e			
Lianet Corrales				
Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	he following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed:	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section		Street Address: Registration Sc		
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303