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Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H20000077728 3)))



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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : TAXLEAF.COM INC
Account Number : I20140000084
Phone : (305)541-3980
Fax Number : (888)772-8108

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
KHUSHI DESIGNER CORP**

Certificate of Status	0
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Page Count	04
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Electronic Filing Menu

Corporate Filing Menu

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MAR 10 2020

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Articles of Amendment
to
Articles of Incorporation
of

KHUSHI DESIGNER CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P19000009246

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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FLORIDA
SEC

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	VP	MATOS LOPES GARCIA, CAROLINA	250, SUNNY ISLES BLVD #1102 SUNNY ISLES BEACH, FL 33160
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

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E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

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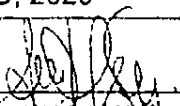
The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
- "The number of votes cast for the amendment(s) was/were sufficient for approval
- by _____"
- (voting group)
- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated MARCH 2ND, 2020

Signature 
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

ANDREA MATOS LOPES GARCIA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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3/5/2020

Detail by Entity Name

Detail by Entity Name

(H200000748093)

Florida Limited Liability Company
RED ROOSTER OF MARCO LLCFiling Information

Document Number L17000008525
FE/EIN Number 81-4974045
Date Filed 01/11/2017
Effective Date 01/10/2017
State FL
Status ACTIVE
Last Event LC AMENDMENT
Event Date Filed 03/05/2020
Event Effective Date NONE

Principal Address1821 SAN MARCO ROAD
MARCO ISLAND, FL 34145Mailing Address512 - 36TH STREET
UNION CITY, NJ 07087

Needs corrected
Did not change mailing address
per the amendment)

Registered Agent Name & AddressLACAVA, ALAN
1821 SAN MARCO ROAD
MARCO ISLAND, FL 34145

Name Changed: 03/05/2020

Authorized Person(s) Detail**Name & Address**

Title MMGR

LACAVA, ALAN
1821 SAN MARCO ROAD
MARCO ISLAND, FL 34145Annual Reports

Report Year	Filed Date
2018	05/01/2018
2019	02/08/2019

Document Images

02/08/2019 - ANNUAL REPORT	View image in PDF format
05/01/2018 - ANNUAL REPORT	View image in PDF format
01/11/2017 - Florida Limited Liability	View image in PDF format

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