#L12000047662

(Requestor's Name)			
(Ad	(Address)		
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
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04/11/14--01030--015 **30.00

EFFECTIVE DATE

ZHIN MAY 30 AHII: 19

K. SALY EXAMINER JUN - 4 2014

ANSON P



April 16, 2014

KNG GRAPHICS, LLC LISA GONZALEZ 3199 CAPRI RD. PALM BEACH GARDENS, FL 33410

SUBJECT: KNG GRAPHICS, LLC. Ref. Number: L12000047662

We have received your document for KNG GRAPHICS, LLC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 514A00008004

Karen A Saly Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration So Division of Con			
WALLEST KNG	Graphics, LLC		
SUBJECT:		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:	
	Lisa Gonzal	ez	
	Name of Person		
KNG Graphics, LLC			
		Firm/Company	
	3199 Capri I	Road	
		Address	··-
	Palm Beach	Gardens, FL 33	3410
		City/State and Zip Code	
	lisa@marlingraphi	CS.COM to be used for future annual report notified	fication)
For further information of	concerning this matter, please co		incursor)
Lisa Gonza	-	_{ar.} 561 635-8	074
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he 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/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

EFFECTIVE DATE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALLAHASSEE FLORIS

KNG Graphics, LLC.

company has been notified in writing of this change.

(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 L	.iability Company	were filed on 4-6-2	012 and assigned
Florida document number L1200004766	2		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and end with the	words "Limited Liab	oility Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		Lisa Gonzalez	
(Principal office address MUST BE A STREET ADDRESS)		3199 Capri Road	
		Palm Beach C	Sardens, FL 33410
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of	l/or registered o	<u>e</u> :	records, enter the name of the new
Name of New Registered Agent:	Lisa Gonzalez		
New Registered Office Address: 3199 Cap			
	Enter Florida street address		
	Palm Bea	ch Gardens	, Florida 33410
		City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registers provisions of all statutes relative to the projections of my position as rea	per and complete	performance of my o	luties, and I am familiar with and

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Name	Address	Type of Action
Kristina Gonzalez	3199 Capri Road	_ Add
	Palm Beach Gardens, FL 33410	■ Remove
Lisa Gonzalez	3199 Capri Road	Add
	Palm Beach Gardens, FL 33410	□ Remove
		□ Add
		□ Remove
		☐ Remove
		Add
		□ Remove
		□ Remove
	Kristina Gonzalez	Kristina Gonzalez 2199 Capri Road Palm Beach Gardens, FL 33410 Lisa Gonzalez 3199 Capri Road

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<i>1 1</i>			

D. If amending any other information, enter change(s) here	: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing 6-1-20 (The effective date must be specific, cannot be prior to date of receipt or fithe date this document is filed by the Florida Department of State))14 (optional) led date and cannot be more than 90 days after
Dated 61-204	/
- Wester Garage	Au. My
Kristina Gonzalez	rized representative of a member Lisa Gonzalez
Typed or printe	ed name of signee

Page 3 of 3

Filing Fee: \$25.00