## L15000166316

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Division of Corporations

February 28, 2017

CINDY STEWART 600 WILLOW WALK PL ST AUGUSTINE, FL 32086

SUBJECT: KASABLE, LLC Ref. Number: L15000166316



We have received your document for KASABLE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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: 817A00003811

Octavia I Simmons Regulatory Specialist II

www.sunbiz.org

Division of Compositions DO ROY 6397 Tallahasson Florida 3931

## **COVER LETTER**

TO:	Registration Section Division of Corpor			
SUBJI	ECT:	KASABLE Name of Lim	LLC	
		Name of Lim	ited Liability Company	<del>.</del>
The en	iclosed Articles of Am	endment and fee(s) are sub	mitted for filing.	
Please	return all corresponde	nce concerning this matter	to the following:	
	•	Cindy	L. Stewart Name of Person	<del></del>
			ABLE, LLC Firm/Company	
			Villow Walk Pl.	
		Saint	Augustine, FL. City/State and Zip Code	
	-	Patienc E-mail address: (1	e 1554 @ Yahoo, (to be used for future annual report notifi	ication)
For fu	rther information conc	erning this matter, please ca	all:	
C	Mdy L. S	Stewart	at ( <u>904</u> ) <u>806- 3</u> Area Code Daytime	3384 Telephone Number
Enclos	sed is a check for the fo	ollowing amount:		
□ \$2	5.00 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KA	ISABLE, LLC	
( <u>Name of the Lim</u>	ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited I. Florida document number <u>L15000166</u>	iability Company were filed on <u>9- 30-201</u>	and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company here:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STREI	ET ADDRESS)	
		ं क
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	· BOX)	္ပ္လ
		21
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:  New Registered Office Address:	LINDY L. STEWART 600 WILLOW WALK Place Enter Florida street address	the name of the new
	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.

f Changing Registered Agent, Signature of New Registered Agent

If amending or removed	If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:						
MGR = M AMBR = A	lanager .uthorized Member	Address Type of Action  Stewart  Remove  Change  Add  b00 Willow Walk II. St. Augustus Remove  Change  Change  Change  Change  Change  Add  Remove					
<u>Title</u>	<u>Name</u>	Address	Type of Action				
MAR	Emdy L. Stewart		□ Add				
			☐ Remove				
		***	Change				
AMBR	KEITH A. Stewart		Add				
		600 Willow Walk Pl. St. Augs	18th Remove F132086				
			□ Change				
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			Change-				
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00