UB000147091

(R	(equestor's Name)	-
(A	.ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	dusiness Entity Name)	
	Ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	o Filing Officer;	





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COVER LETTER

TO: Registration Se Division of Cor		•	
Kenco Con	nmunities Realty LLC		
30bjt.C1	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subt	nitted for filing.	
Please return all correspo	ndence concerning this matter (to the following:	
	Steven F. Wallace, Esq.		
	The Wallace Law Group, P	Name of Person	
	2240 W. Woolbright Road	Firm/Company #403	
	Boynton Beach, Florida 33	Address	
	wallacelawl@me.com	City/State and Zip Code	
	E-mail address: (1	to be used for future annual report notif	ication)
For further information of	oncerning this matter, please ca	all:	
Steven E. Wallace, Esq.		561 877-6020	
Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	S30.00 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, F1, 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

lity Company as it now appears on our records. da Limited Liability Company))
Company were filed on	and assigned
nited liability company here:	
mited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
DRESS)	
istered office address on our records, dress here:	enter the mame of the new
Enter Florida street address	
, Floi	rida Zip Code
	Company were filed on

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>	Address	Type of Action
MGR	Kenneth Endelson	7700 Congress Avenue, Suite 2204 Boca Raton, Florida 33487	⊟ Add
			Aud
			□ Remove
			Change
Board	Lorna Swartz	7700 Congress Avenue, Suite 2204 Boca Raton, florida 33487	■ Add
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. Effective date, if othe (If an effective date is listed,	r than the date of	filing:	- to data of filing	or more than 90 day	(optional)	uni to 605 026
Note: If the date inserte	ed in this block does	s not meet the appli	cable statutory	filing requirement	ts, this date will no	ot be listed a
document's effective da	te on the Departmer	nt of State's record:	S.			
					0.4	4:
the record specifies b) The 90th day afte	a delayed effect er the record is f	tive date, but n filed.	ot an effecti	e time, at 12	:01 a.m. on tn	e earlier (
August 29		2018				
Dated		<u> </u>	<u> </u>			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00