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J. SAULSBERRY EXAMINER AUG 0 1 2013

## **COVER LETTER**

Registration Section

TO:

Division of Corporations
SUBJECT: KIS Tovestment Holdings, LILP Name of Florida Limited Partnership or Limited Liability Limited Partnership
The enclosed Certificate of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Laurie Wortman Contact Person
KLS Investment Holdings, LLLP Firm/Company
11940 NW 9TL St. Address
Coral Springs F1. 33071  City, State and Zip Code  Santoras & Me. Com  Email address: (to be used for future annual report potification)
Santoras @ Me.Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:  1 au 1 au 2 au 2 au 2 au 2 au 2 au 2 au
Name of Contact Person at (954) 461-0657
Enclosed is a check for the following amount:
\$52.50 Filing Fee and Certificate of Status  \$105.00 Filing Fee Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
Clifton Building P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314
Tallahassee, FL 32301

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

KLS Investment Holdings, LLLP
Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Fl limited liability limited partnership, whose certific octors adopts the following certificate of amendment to this amendment is submitted to amend the following:	cate was filed wit rida document nu	th the Florida D imber <u><b>A</b> O6</u>	Department of Sta	ite on
A. If amending name, enter the new name of the li here:	imited partnership	or limited liab	ility limited parti	<u>nership</u>
New name must be distinguish	able and contain an a	acceptable suffix.		
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes: l			L.L.L.P. or LLLP.	
B. If amending mailing address and/or princip principal office address here:	pal office addres	s, <u>enter new m</u>		
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New Principal Office Address:				<u> </u>
(Must be STREET address)				Ξ
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Navy Mailina Address			a-4. i	
New Mailing Address: (May be post office box)				
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		_	Er.	
C. If amending the registered agent and/or registoner registered agent and/or the new registered office		s on our record	s, enter the name	e of the
new registered agent and/or the new registered offic	e address here:			
Name of New Registered Agent:				
New Registered Office Address:				
New Registered Office Address.	Enter Florida street address			
		F31. * 1		
<del></del>	City	, Florida	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.

If Changing Registered Agent, Signature of New Registered Agent

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
General Parton	er Kenneth M. Worto	nan (deceased) 11940 NW 9th st Comi Sorins F	Add Remove
Trustee	Laurie Wortman	3307 11940 NW 97L5 Coral Springs	Add Remove
	partnership or limited liability l	limited partnership is amen	Remove  Add Remove
This Limited	ip" status, enter change here: d Partnership hereby elects to be a d Partnership hereby removes its "	•	•

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

F. If amending any other inform	mation, enter change	(s) here: (Attach addition	al sheets, if necessary.)
		······	
Effective date, if other than the date	of filing:		
Effective date, it office than the date (Effective date cannot be prior to nor more State.)	e than 90 days after the	date this document is filed by	the Florida Department of
мие.)			
Signature(s) of a general partner	or all general nert	nors*•	
		<del>_</del>	
(*NOTE: Only one current general partner removing a "limited liability limited partner when adding or removing a "limited liability limited liability liabil	ership" election stateme	nt. Chapter 620, F.S., requir	
Sourie Water	_ (decea	sed)	
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			*** B
Signature(s) of all new or dissocia	ating general partn	er(s), if any:	8: 30 03/16 03/10
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F.W F.	255 50		
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50		
Certificate of Status (optional):	\$8.75		