L0200030851

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Business Entity Name) |
| |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | | | | |
|--|---|--|--|--|
| SUBJECT: KAN Investment Company, LLC | | | | |
| | nited Liability Company) | | | |
| The enclosed Articles of Amendment and fee(s) are sull Please return all correspondence concerning this matter | • | | | |
| | Nancy C. Zyski | | | |
| | (Name of Person) | | | |
| KAN Inve | estment Company, LLC | | | |
| | (Firm/Company) | | | |
| 1597 The Greens Way, Suite 200 | | | | |
| | (Address) | | | |
| Jacksonville I | Beach, Florida 32250 | | | |
| (City/State and Zip Code) | | | | |
| For further information concerning this matter, please | call: | | | |
| Charlene Cruz (Name of Person) | at (904) 285-1397 (Area Code & Daytime Telephone Number) | | | |
| (Name of Person) | (Alea Code & Daytime Telephone Number) | | | |
| Enclosed is a check for the following amount: | | | | |
| \$25.00 Filing Fee \$\sum \text{Certificate of Status}\$ | \$55.00 Filing Fee & \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) 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 | | | |

FILED

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SECRETARY OF STATE TALLAHASSEE FLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| KAN Investme | ent Company, LLC | |
|--|---|---|
| (<u>Name of the Limited Liabil</u> (A Florid | lity Company as it now appears on our recorda Limited Liability Company) | <u>ds.</u>) |
| The Articles of Organization for this Limited Liability | Company were filed on 11/18/2002 | and assigned |
| Florida document number <u>L02000030851</u> | | |
| This amendment is submitted to amend the following: | : | |
| A. If amending name, enter the new name of the li | imited liability company here: | |
| The new name must be distinguishable and end with the v "L.L.C." | words "Limited Liability Company," the design | nation "LLC" or the abbreviation |
| B. If amending the registered agent and/or reg registered agent and/or the new registered office a | | enter the name of the <u>new</u> |
| Name of New Registered Agent: | | |
| New Registered Office Address: | (************************************** | |
| | (Enter Florida street address) | |
| _ | | rida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Register | ered Agent: | |
| I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change | r and complete performance of my duties, d agent as provided for in Chapter 608, F tered office address, I hereby confirm tha | and I am familiar with and F.S. Or, if this document is |
| | (If Changing Registered Agent, Signature of | of New Registered Agent) |

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

MGR = Manager

| MGRM MGRM | Nancy C. Zyski | 1597 The Greens Way, Suite 200 | ☐ Add |
|---------------|---------------------------------------|--|---|
| MGRM | | Jacksonville Beach, FL 32250 | Add Remove |
| | Zyski Family Holdings | 1597 The Greens Way, Suite 200 Jacksonville Beach, FL 32250 | Add Remove |
| | | | Add Remove |
| · | | | Add Remove |
| , | | | Add Remove |
| | | Add Remove | |
| D. If amendin | g any other information, enter change | e(s) here: (Attach additional sheets, if necessary.) | <u> </u> |
| | | | SECRE |
| Dated Apri | 123, 2008 | | PR 25 PH 12: 33 RETARY OF STATE AHASSHE FLORIDA |
| | Signature of a member | or authorized representative of a member | <u> </u> |

Page 2 of 2

Filing Fee: \$25.00