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09 MAR 20 AM IO: 39 SECRETARY OF STATE SALLAHASSEE, FLORID

M. THOMAS

MAR 23 2009

EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp		•		
SUBJECT: Russell	J. Harden III, LLC			
(Name of Limited Liability Company)				
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	Karen Harden			
		(Name of Person)		
		(Firm/Company)		
	1045 Parkwood Dr		05	
		(Address)	SECTION TO	
	Ormond Beach, FL 32174			
		(City/State and Zip Code)		
For further information co	ncerning this matter, please ca	all:	09 MAR 20 AM IO: 39 SECRETARY OF STATE TALLAHASSEE FLORID	
Karen Harden		at (386 ₎ 871-7021	7	
(Name of	Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for the	e following amount:			
2 \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Russell J. Harden III, LLC	
(Name of the Limited Liability Cor	mpany as it now appears on our records.) ted Liability Company)
- (A Florida Cilini	ted Liability Company)
The Articles of Organization for this Limited Liability Comp	pany were filed on 1/13/2004 and assigned
Florida document number L0400003403	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
RK Plus Enterprises LLC	
The new name must be distinguishable and end with the words "I "L.L.C."	Limited Liability Company," the designation "LLC" or the abbreviation
L.L.C.	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on our records, enter the name of the new
registered agent and/or the new registered office address	nere.
Name of New Designation of Asserts	
Name of New Registered Agent:	
New Registered Office Address:	
	(Enter Florida street address)
	, Florida
1	(City) (Zin 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 608, 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 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 = Managing Member <u>Title</u> **Address Type of Action** Name 1 Add Remove ☐ Add Remove 🗂 Add 🗖 Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Mach 16 Signature of a member or authorized representative of a member KAREN L. HARDEN
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00