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D. BRUCE
OCT 4 2011
EXAMINER

COVER LETTER

TO: Registration Division of C			
SUBJECT:	К	GR, LLC	
SUBJECT.		ited Liability Company	
•			
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	•
Please return all corres	pondence concerning this matte	r to the following:	
	·	Kuchakuila N. Reddy	
Name of Person			
KGR, LLC			
Firm/Company		Firm/Company	
11265 Bridgehouse Rd			
		Address	
	V	Vindermere, FL 34786	
		City/State and Zip Code	
	E-mail address: (dtottel@aol.com (to be used for future annual report notification)	- ASA
For further information	concerning this matter, please	call:	THE F
	D T # 1	700 0044	SS = [7]
· · · · · · · · · · · · · · · · · · ·	Dawn Tottel of Person	at (352) 732-9844 xt8 Area Code & Daytime Telephone No	31 전속
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	0 Filing Fee, tificate of Status & tified Copy ditional copy is enclosed)
Regis Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	SS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KGR,	LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears Liability Company)	on our records.	
The Articles of Organization for this Limited Liability Company Florida document numberL0400014532	were filed on	02/24/2004	and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited liab</u>	mity company nere		
The new name must be distinguishable and end with the words "Limi" L.L.C."	ited Liability Compar	y," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:	1623 SW 1st /	Ave	
(Principal office address MUST BE A STREET ADDRESS)	Ocala, FL 344	71	
Enter new mailing address, if applicable:			T-3
(Mailing address MAY BE A POST OFFICE BOX)		E. 1078E11	79 3 17
			OR F
B. If amending the registered agent and/or registered of	Tica address on a	ir rocarde antar	the name of the new
registered agent and/or the new registered office address her		ar records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ente	er Florida street ac	ldress
		, Florida _	7: 0 1
	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 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>	<u>Name</u>	Address	Type of Action			
MGR	Renuka R. Kuchakulla	11265 Bridgehouse Rd Windermere, FL 34786	Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
D. If amendir	ng any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)				
		r _i	11 001 -3 PM 4:			
Dated	January 1 , 20	010 · /	- G			
_	Signature of a member	or authorized representative of a member				
_	Kuc	chakulla N. Reddy				
	Typed or printed name of signee					

Page 2 of 2

Filing Fee: \$25.00