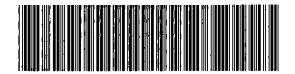
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(Requestor's Name)				
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2011 JUL 18 AH 11: 12
SECRETARY OF STATE

T. CLINE
JUL 19 2011
EXAMINER

COVER LETTER

то:	Registration S Division of Co	Section orporations		
SUBJE	ECT•			
30031				
The end	closed Articles of	f Amendment and fee(s) are sul	omitted for filing.	
Please	return all corresp	ondence concerning this matter	to the following:	
			Name of Person	
WORLD KING, LLC				
			Firm/Company	
	13315 NE 6 AVE, OFFICE			
		2011 SEC		
		ARY SSE		
		E-mail address: (ebby00@bellsouth.net to be used for future annual report notificat	ion) mc a M
For fur	ther information	concerning this matter, please of	eali:	2011 JUL 18 AM 11: 12 SECRETARY OF STATE TALLAHASSEE, FLORIDA
	Shlo	mo Chelminsky	at (305) 94	5-6667
	Name	of Person	Area Code & Daytime To	elephone Number
Enclose	ed is a check for t	the following amount:		
 √ \$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 1 Status & Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tration Section on of Corporations Box 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 32301	ons r Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WORLD KING	G, LLC	
(Name of the Limited Liability Company a (A Florida Limited Liab	s it now appears on our records.) lity Company)	
The Articles of Organization for this Limited Liability Company we	re filed on ar	nd assigned
Florida document numberL05000011685		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
The new name must be distinguishable and end with the words "Limited "L.L.C."	Liability Company," the designation "LLC" o	r the abbreviation
Enter new principal offices address, if applicable:	SEC	2011
(Principal office address MUST BE A STREET ADDRESS)	AHE	٢: ع
	ASSEE.	
Enter new mailing address, if applicable:	# <u>S</u>	
(Mailing address MAY BE A POST OFFICE BOX)	DRIDATE	
-		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our records, enter the na	me of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	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

Type of Action Title <u>Name</u> **Address MGRM** ALLEN CHELMINSKY 13315 NE 6 AVE, OFFICE ✓ Add NORTH MIAMI, FL 33161. Remove Add ☐ Remove ☐ Add ☐ Remove Remove 10 ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 14 2011 Dated_ Signature of a member or authorized representative of a member SHLOMO CHELMINSKY Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00