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(Document Number)		
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COVER LETTER

TO:

Registration Section **Division of Corporations**

KLIMA & ASSOCIATES FINANCIAL SERVICES LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EVA M KLIMA

Name of Person

KLIMA & ASSOCIATES FINANCIAL SERVICES LLC

Firm/Company

6511 N HIMES AVE

Address

TAMPA, FL 33614

City/State and Zip Code

EVAKLIMA@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EVA KLIMA

at (813) 526-9885

Name of Person

Enclosed is a check for the following amount:

\$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

KLIMA & ASSOCIATES FINANCIAL SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited L	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L05000092038</u>	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the designation "LLC	or the abbreviation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	27524 Cash Porchagel	1 or # 100 FC 3544
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6511 N HiMIS 1 TAMPA FL 3.	1ve 36/4
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on our records, enter the	name of the new
Name of New Registered Agent:		
New Registered Office Address:		
Topicorda Sirico radioss.	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre the provisions of all statutes relative to the proper and compl accept the obligations of my position as registered agent as p	ete performance of my duties, and I am j provided for in Chapter 608, F.S. Or, if the	familiar with and his document is

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

or Managing	g Member being added or removed fro	nt our records.	
MGR = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	KLIMA AND ASSOCIATES FINANCIAL SERVICES	6511 N HIMES AVE, TAMPA FL 3361	4 Add
			Remove
MGR	EVA M KLIMA	6511 N HIMES AVE, TAMPA FL 3361	4 🕢 Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
		> 4.	Remove
		- 200 - 200	12 DEC 28 Add
			Remove

D. If amending any other information, e	enter change(s) here: (Attach additional sheets, if necessar	y.)
Dated DECEMBER 24		
\mathcal{D}	Va Klima	
Signature	of a member or authorized representative of a member	
EVA M KLIMA		
	Typed or printed name of signee	

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Filing Fee: \$25.00