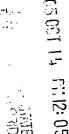
## 

(Re	equestor's Name)	··········
(Ad	ldress)	
(Ad	ldress)	
(		
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	MAIT	MAiL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		Mrh.
		101.3
	Office Use On	1 / W



10714/16--01038 -U63 \*\*25.00



## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: LKG, LLC (Name of	Limited Liability Company)	
The enclosed Articles of Amendment and fee(s) are a Please return all correspondence concerning this mat	_	
LINDA S. WE	ITZMAN, ESQUI	RE
LINDA S. WEIT	TZMAN, PL (Firm/Company)	
4102 WASHIN	IGTON ROAD (Address)	65 0CT
	BEACH, FL 3340 ity/State and Zip Code)	,
For further information concerning this matter, please	e call:	2: 05 STATE CENTO
LINDA S. WEITZMAN, ESC (Name of Person)	QUIRE at 561 659 (Area Code & Daytime	0-7344 e Telephone Number)
Enclosed is a check for the following amount:		
\$25.00 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:	STREET/COURII	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

L	KG, LLC		
	(Present Name) (A Florida Limited Liability Company)		<del></del>
FIRST:	The Articles of Organization were filed on SEPTEMBER 19, 2005 and assigned document number L05000095251		
SECOND:	This amendment is submitted to amend the following:		
	CHANGE THE NAME TO LKG PROPERTY MANAGEMEN	NT, LLC	2
			_
	AND, TO DELETE THE FOLLOWING NAMES AS MEMBERS OF 1	HE LLC	· -
	KAREN MALOOF AND LORRAINE MALOOF	- ;"(; <u>;</u> ;:n	Ē
		m S	- E
		유왕	- P
		SH.	05
			-
		· <u></u>	-
Dated O	CTOBER 12 , 2005 .		-
	Signature of a member or authorized representative of a member	<del></del>	
	GLEN MALOOF  Typed or printed name of signee		

Filing Fee: \$25.00