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Special Instructions to Filing Officer:					
(City/State/Zip/Phone #) CERTIFICATION (City/State/Zip/Phone #) (City/State/Zip/Phone #) (MAIL MAIL (Business Entity Name) (Document Number) (Document Number) Certified Copies Certificates of Status					
(City/State/Zip/Phone #) (City/State/Zip/Phone #) (PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:					
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Special Instructions to Filing Officer:					
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8/10/18					
Office Lice Only					



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10/18/06--01020--012 **30.00

COVER LETTER

Division of Corporations	
SUBJECT: K3 M Remodeline LLC. (Name of Limited Liability Company)	
(Name of Limited Liability Company)	
in the second of	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Chad Malmetrom (Name of Person)	
K? M Remodeling - (Firm/Company)	•
2534 Ave Av Sole:1	•
Delray Beach FL 33483 (City/State and Zip Code)	
For further information concerning this matter, please call:	v
(Name of Person) at (561) 503 5085 (Area Code & Daytime Telephone Number)	
	•
Enclosed is a check for the following amount:	
\$30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certificate Of Status	:

MAILING ADDRESS:

TO:

Registration Section

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

· —	(A Florida Limited Liability Company)	
	(A Fronta Emated Enablity Company)	
		-
FIRST:	The Articles of Organization were filed on and document number	assigned
SECOND:	This amendment is submitted to amend the following:	u u
,	Take off "Bran Kane"	from
,	articles of Organization)
•		
	Send Certified copy to	
•	2534 Ave Au Soleil	1
	Delray Beach FL 33493	
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	/) Y
Dated	<u>10/10</u> , <u>2006</u>	$\langle X_{ij} \rangle = \langle X_{ij} \rangle$
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	Led Bulet	¹ _▼ ·
- .	Signature of a member or authorized representative of a member	06
	Chad Malmstrom	OCT
	Typed or printed name of signee	· · · · · · · · · · · · · · · · · · ·

Filing Fee: \$25.00

SECRETARY OF STATE IVISION OF CORPORATIONS