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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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T. CLINE

SEP 22 2009

EXAMINER

**STUART B. KLEIN, P.A.**

2801 PGA Blvd., Ste. 110  
Palm Beach Gardens, FL 33410

Telephone: (561) 478-1566  
Facsimile: (561) 478-9931

Stuart B. Klein, Esq.  
Also Admitted in New York and Ohio  
E-mail: [sbk@kleinslaw.com](mailto:sbk@kleinslaw.com)

Leah A. Sarge, Esq.  
E-mail: [laf@kleinslaw.com](mailto:laf@kleinslaw.com)

September 16, 2009

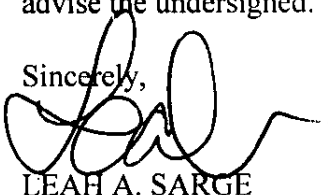
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Kleinhop, LLC

Dear Registration Section:

Enclosed please find Check No. 18677 in the amount of \$25.00 which represents the filing fee for a revision to the Articles of Organization for the above named corporation. Please send me a letter of acknowledgement once these articles have been filed. If you need anything further, please advise the undersigned.

Sincerely,



LEAH A. SARGE

LAF:lgt  
Encs.

2009 SEP 21 AM 11:00  
SECRETARY OF STATE  
TALLAHASSEE, FL 32314

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: KLEINHOP, 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:

STUART B. KLEIN

Name of Person

STUART B. KLEIN, P.A.

Firm/Company

2801 PGA BLVD., STE. 110

Address

PALM BEACH GARDENS, FL 33410

City/State and Zip Code

SBK@KLEINSLAW.COM

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

2009 SEP 21 AM 11:20  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

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For further information concerning this matter, please call:

STUART B. KLEIN

Name of Person

at ( 561 )

478-1566

Area Code & Daytime Telephone Number

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**

**KLEINHOP, LLC**

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

The Articles of Organization for this Limited Liability Company were filed on 04/18/2006 and assigned  
Florida document number L06000040105.

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 Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*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 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:

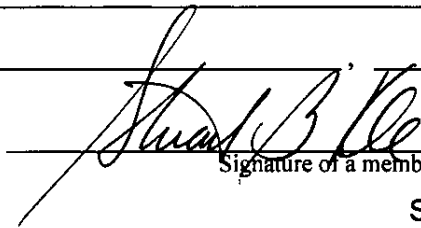
MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	JEFFREY M. BISHOP	1760 ANNANDALE CIRCLE ROYAL PALM BEACH, FL 33411	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	STUART B. KLEIN	2801 PGA BLVD., STE. 110 PALM BEACH GARDENS, FL 33410	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	JEANINE M. KLEIN	10113 HUNT CLUB LANE PALM BEACH GARDENS, FL 33418	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated \_\_\_\_\_



Signature of a member or authorized representative of a member

STUART B. KLEIN

Typed or printed name of signee

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2023 SEP 21 AM 11:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA