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SECRETARY OF STATE
FALLAHASSEE, FLORIDI

T. CLINE
JAN 12 2009
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: Flying Dragon Karate 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:						
Justin Percinal (Name of Person)						
Flying Dragon Karate (Film/Company)						
6222 Moray Ave (Address)						
New Port Richey, FL 34653 (City/State and Zip Code)	7009 JAN -9					
ASS STATE OF THE S	9					
For further information concerning this matter, please call:	in the second					
Tustin Percina at (727) 403 - 6932 PA (Area Code & Daytime Telephone Number) Sin	AH 10: 13					
Enclosed is a check for the following amount:						
\$25.00 Filing Fcc Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fcc & Certified Copy (additional copy is enclosed) \$25.00 Filing Fcc & Certificate of Status Certified Copy (additional copy is enclosed)						

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, 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

FLying Dragon Karate LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)					
(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 $\frac{4/24/2006}{20000042142}$ and assigned Florida document number $\frac{L06000042142}{200000000000000000000000000000000000$					
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: 6222 Moray Aug =					
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) New Port Richey, Fits 3 465 3					
Enter new mailing address, if applicable: P.O. Box 1/1/2 5000000000000000000000000000000000000					
(Mailing address MAY BE A POST OFFICE BOX) York Kichey, FL 546/5					
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: Justin Perciva					
New Registered Office Address: 6222 Moray Ave (Enter Florida street address)					
Name of New Registered Agent: New Registered Office Address: Description Description					
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					

(If Changing Registered Agent, Signature of New Registered Agent)

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 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>	Name	Address	Type of Action		
MGRM	William REvans Jr	13767 OgaKor Dr REVERVIEW, FL 33569	Add Remove		
MGRM	Justin Percina/	DEVEL Moray Ave New Part Rocher, EL 34653	Add Remove		
		THE AS	Add Remove		
			Add Romove A		
			Add Remove		
D. If amend	ing any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)		
					
Dated Ja	(nuary 5 , 20	209.			
	Jus	or authorized representative of a member			

Page 2 of 2

Filing Fee: \$25.00