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C. LEWIS

APR 1 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: KEN DAWN Enterprises, 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:
Kenneth Bunzel Name of Person
Firm/Company
401 Poincianna De
Port Orange FL 32/27 City/State and Zip Code
E-mysladess! (to be used for future annual report notification)
For further information concerning this matter, please call:
Pacien Bungel at 36 767-2462 Area Code & Daytime Telephone Number CELL 866-313-5146 (DAY)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$55.00 Filing Fee \$\ \text{Certified Copy}\$\$ (additional copy is enclosed) \$\ \text{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



Name of the Limited Lia	=r/+er or bility Company	(SES)	LLC rs on our recor	2011 MAR 34	PM 😂 Od		
The Articles of Organization for this Limited Liabil Florida document number	ity Company we	omty Company)	10/6/2	OOO and a	FEORIDA ssigned		
This amendment is submitted to amend the following	ıg:						
A. If amending name, enter the new name of the Lenge W. Buyee The new name must be distinguishable and end with the "L.L.C."	•			ation "LLC" or the	abbreviation		
Enter new principal offices address, if applicable	: _	S	401	Poince	anna D		
(Principal office address MUST BE A STREET A	DDRESS)		- Port	Orange,	FL 32127		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	SS	401 Part	Poincia Orang,	una De FL 32127			
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:	Same	····					
New Registered Office Address:	Same		A Fi • 1				
	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 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** ☐ Add Remove ☐ Add ☐ Remove Add ☐ Remove ☐ Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Dated of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00