L01000005172

(Requestor's Name)				
(Ad	dress)			
(Ad	dress)	·		
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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12 OCT -1 AM 9: 36

SECRETARY OF STATE
TALL AHASSEE, FLORIDA

COVER LETTER

FO: Registration Section Division of Corporations
SUBJECT: Kennedy's Lema Seiz VILES 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:
Vincent Kenney Name of Person
Old Kennedy's Home Services LLC Firm/Company New KAD PRECISE PAINTIN
193 Pinehurs+ Circle Address
WAPIES FL 34113 City/State and Zip Code V/Ken 106817 Al Aoc. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
VinCent Kenney at (239) 821-0899 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & \text{Certified Copy (additional copy is enclosed)}} \ \$60.00 Filing Fee, \text{Certificate of Status & \text{Certified Copy (additional copy is enclosed)}} \ \$60.00 Filing Fee, \text{Certificate of Status & \text{Certified Copy (additional copy is enclosed)}} \ \$ \ \$60.00 Filing Fee, \text{Certificate of Status & \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



September 20, 2012

VINCENT KENNEDY 193 PINEHURST CIRCLE NAPLES, FL 34113

SUBJECT: KENNEDY'S HOME SERVICES L.L.C.

Ref. Number: L07000005172

We have received your document for KENNEDY'S HOME SERVICES L.L.C. and your check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following:

Missing page (2) of the Amendment form. I am enclosing the page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 512A00023629

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Name of the Limited Liability Company as it now appears on our records AHASSEE, FLORIDA

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 9/17/3012 and assigned Florida document number LO76000 5172 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) SPMC 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

<u>Title</u>	<u>Name</u>	Address	Type of Action
	<u> </u>		Add Remove
			Add Remove
			Damassa.
			Add Remove
			Add Remove
			Add Remove
D. If amen	nding any other information, enter cha	nge(s) here: (Attach additional sheets, if necess	
– –			FILED: 12 OCT -1 AM 9: 36 TALLAMASSEE, FLORIDA
			EE, FLORID
			ANTE S

Page 2 of 2

Filing Fee: \$25.00