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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DIVINE Kitchen Design 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:

PETER Brooks  
(Name of Person)

DIVINE Kitchen Design LLC  
(Firm/Company)

P.O. Box 13  
(Address)

Jensen Beach, FL 34957  
(City/State and Zip Code)

For further information concerning this matter, please call:

Peter Brooks at (772) 288-3719  
(Name of Person) (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  
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☐ \$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

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TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

DIVINE KITCHEN DESIGN LLC.

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 5-21-07 and assigned document number 400102967354.

**SECOND:** This amendment is submitted to amend the following:

DIVINE KITCHEN DESIGN LLC. BE  
REINSTATED TO THE ORIGINAL APPLICATION  
UNTIL ALL PARTIES COME TO A MUTUAL  
AND LEGALLY NOTORIZED AGREEMENT SIGNED  
BY ALL PARTIES.

Dated 6/4/07, \_\_\_\_\_.



Signature of a member or authorized representative of a member

PETER BROOK

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00