L0700001472

(Requestor's Name)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
L. SELLERS	
JUN 1 7 2011	

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EXAMINER



600207926716

05/24/11--01013--012 **35.00

11 JUN 16 AMIL: 26
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

COVER LETTER

Division of Co	orporations					
SUBJECT:		gedet LLC				
	Name of Lim	ited Liability Company				
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.				
Please return all corresp	condence concerning this matte	r to the following:				
	Bobby Fishbein					
		Name of Person				
Kerberos Holdings LLC						
		PO Box 1126				
		Address				
Live						
		City/State and Zip Code				
	bobby E-mail address: (.fishbein@kerberosllc.com to be used for future annual report notific	ation)			
For further information	concerning this matter, please	call:				
Bobby Fishbein		at (_386)2	92-9630			
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 (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



June 6, 2011

BOBBY FISHBEIN P.O. BOX 1126 LIVE OAK, FL 32064-1126

SUBJECT: BOGEDET LLC. Ref. Number: L07000026972

We have received your document for BOGEDET LLC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6967.

Letter Number: 011A00013794

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Bogede			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appear Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company Florida document numberL0700026972	were filed on	3/12/2007	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here	<u>:</u> :	
Kerberos Hol	dings LLC		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compar	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	9611 209th Ro	d	
(Principal office address MUST BE A STREET ADDRESS)	Live Oak FL 3	2060-5886	
Enter new mailing address, if applicable:	PO Box 1126		
(Mailing address MAY BE A POST OFFICE BOX)	Live Oak FL 3	2064-1126	
			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ur records, <u>enter t</u>	me name of the new
Name of New Registered Agent:		,	
New Registered Office Address:			Te ≥ m
	Ente	er Florida street add	
	City	, Florida	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 = M: MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			D Damova
			□ n
			- Pamaya
			⊟ n
			Add Remove
D. If amen	ding any other information	, enter change(s) here: (Attach additional sheets, i	f necessary.)
_			
	June 13	2006	
Dated		Rella Fall	
	Signatu	re of a member of authorized representative of a member Bobby Fishbein	ı
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00