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08/02/11--01016--003 **25.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

T. CLINE
AUG - 3 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: KD MINING, 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:			
KAMLA PARTAP DASRATH			
Name of Person			
KDM (KDMINING, LLC			
Firm/Company			
7521 Grant St			
Hollywood FL 33024 Fig. =			
City/State and Zip Code Rdemail@pobor, Com Email address to be used for fluore annual anext postification SERY 2			
12-man address, to be deed for inture annual report normation)			
For further information concerning this matter, please call:			
For further information concerning this matter, please call: Lamla Daskatt 954 986 4325 FLORIDE			
Name of Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount:			
\$25.00 Filing Fee Solution \$30.00 Filing Fee Solution \$55.00 Filing Fee Solution \$60.00 Filing Fee, Certificate of Status Solution \$60.00 Filing Fee, Certificate of S			

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

KDMINING	5.1.LC
(Name of the Limited Liability C	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Con	mpany were filed on $6/25/2007$ and assigned
Florida document number 40700066	, C 2 3
Florida document indinber	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ed liability company here:
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	
Enter new mailing address, if applicable:	TARY ASSEE
(Mailing address MAY BE A POST OFFICE BOX)	77
	ORAL CONTRACTOR OF THE STATE OF
B. If amending the registered agent and/or register registered agent and/or the new registered office addresses	red office address on our records, <u>enter the name of the new</u> ss here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zin 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 Changing Registered Agent, Signature of New Registered Agent

If an ending 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 Title Name Address **Type of Action** DAVANANDIDASRATH MGRM □ Add Remove MGR DAVAWAND J DASRATH Remove Add Remove Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee