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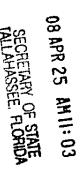
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M. Thomas APR 28 2008

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Konglo International 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:
Semonie Kong (Name offerson)  Kong(o International LLC (Firm/Company)  PO BOX 1145 (Address)  OLOCELF1 34761 (City/State and Zip Code)
For further information concerning this matter, please call:
Semonie Kong at (407,574-2405 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  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 Taliahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kong co Inter	Mational LLC ability Company as it now appears on o	urr records )	
(A Flo	orida Limited Liability Company)	ar records.	
The Articles of Organization for this Limited Liabi	· · · · · · · · · · · · · · · · · · ·	and assigned	
This amendment is submitted to amend the followi	ng:		
A. If amending name, enter the new name of th	e limited liability company here:		
A. If amending name, enter the new name of the The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Company," th	ne designation "LLC" or the abbreviation	FIL
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our re	ecords, enter the name of the new	<u> </u>
Name of New Registered Agent:		<b>DI</b> ''	
New Registered Office Address:	(Enter Fl	orida street address)	
		. Florida	
<del>-</del>	(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 Changing Registered Agent, Signature of New Registered Agent)

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 Type of Action <u>Title</u> Name **Address** MGRM Add \_Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Semonie Kona Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00