L08000025079

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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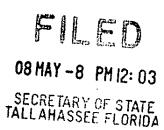
TO: Registration Section Division of Corporations		
SUBJECT: KD Pool Supplies LLC.		
	Limited Liability Company)	, , , , , , , , , , , , , , , , , , ,
The enclosed Articles of Amendment and fee(s) are Please return all correspondence concerning this ma	-	
Kelley Douglass		
	(Name of Person)	
KD Pool Supplies		
-	(Firm/Company)	
566 Barton Blvd #	!1	
	(Address)	
Rockledge FI 329	55	
	(City/State and Zip Code)	
For further information concerning this matter, plea	se call:	
Keiley Douglass	at (321) 474-4848	
(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)	Sectificate of Status & Certified Copy (additional copy is enclosed)
MAH INC ABDDESS.	CTDEET/CAUDIE	ANNDESS.

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



KD Pool Supplies LLC. (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 3/10/2008 and assigned Florida document number <u>L08000025079</u> 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." 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) (City) 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

(If Changing Registered Agent, Signature of New Registered Agent)

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:

Title	Name	Address	Type of Action
MGRM	Mark Douglass	566 Barton Blyd #1	Add
111,21,41		Rockledge Fl 32955	✓ Remove
			Add Remove
		Kentove	
		∏Add	
		Remove	
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D. If amendi	ng any other information, enter c	hange(s) here: (Attach additional sheets, if nece	essary.)
			SECONOMIA TO
			SECRETAR SECRETAR ALLAHASS
			TARY YARY
Dated April 4 , 2008 .		PAI	
	KODO Dare	ula_	8 HAY -8 PH 12: 03 SECRETARY OF STATE ALLAHASSEE FLORIDA
		ν	
_	Kelley Dor Signature of a mo	ember or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00