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SECRETARY OF STATE
TALLAHASSEF FI DBIN

T. HAMPTON

AUG 2 5 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: KM & A TROPERTIES, 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:
PATRICK MYNES (Name of Person)
KMJA PROPERTIES, LLC (Firm/Company)
1309 WILLOW WIND DR
CLERMONT FL 34711 (Cfty/State and Zip Code)
For further information concerning this matter, please call:
PATRICK MINES at (352) 348-6117 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company)

(A Flo	orida Limited Liability Company)	
The Articles of Organization for this Limited Liabi	lity Company were filed on 4-1	8-2008 and assigned
Florida document number <u>Lo 8 00039</u>	161.	
This amendment is submitted to amend the followi	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	
KMA MANAGEMENThe new name must be distinguishable and end with the "L.L.C."	re words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	ADDRESS)	
	 	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	(Friter	Florida street address)
-	(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 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> **Address** <u>Name</u> MGR KELLY BAKEWELL 1309 WILLOW WIND PR CLERMONT FL 347/1 Remove MMGR MECISSA MYNES 1309 WILLOW WIND DR ☐ Add CLEXMONT, FL 34711 Remove Add 🗂 Remove □ Remove ___ Add Remove ┌ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary, 8-18-08

> Signature of a member or authorized representative of a member PATRICK MYNES
> Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00