(Re	equestor's Name)			
(Ac	idress)	· · · · · · · · · · · · · · · · · · ·		
(Ac	idress)			
(Ci	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
-				

G. MCLECD

JUL 25 2008

EXAMINER



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## **COVER LETTER**

TO: Registration Sec Division of Corp		e e	* /
	OWM IMPORT & EX	XPORT LLC	6
	(Name of Lim	ited Liability Company)	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	MARCUS B. LIMA		
	-	(Name of Person)	
		(Firm/Company)	
	4119 TEE ROAD		
		(Address)	
		(City/State and Zip Code)	
For further information co	oncerning this matter, please c	all:	
MARCUS B. LIMA		at ( 941 ) 400-7110	
(Name o	f Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for th	e 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



## KINGDOWM IMPORT & EXPORT 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 Florida document number <u>L08000054956</u> .	were filed on 06/03/2008	and assigned
This amendment is submitted to amend the following:	*	
A. If amending name, enter the new name of the limited liab	pility company here:	
KINGDOM CONTRACTING LLC		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	5216 AVENIDA DE CORTEZ APT A	
(Principal office address MUST BE A STREET ADDRESS)	SARASOTA, FLORIDA 34232	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	5216 AVENIDA DE CORTEZ APT A SARASOTA, FLORIDA 34232	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her  Name of New Registered Agent:  New Registered Office Address:	(Enter Florida street ada	
<del></del>	, Florida	(Zip Code)
	()	( K 4000)

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 = Manager MGRM = Managing Member Address **Type of Action Title** Name \_ Add Remove Add Remove 🗂 Add Remove \_ Add ☐ Remove \_ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated JULY 22 , 2008

Signature of a member or authorized representative of a member

MARCUS B. LIMA

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00