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(Requestor's Name)	_
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(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Dyninger Entity Name)	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	
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COVER LETTER

Div	ision of Cor	porations		
SUBJECT:	KAZCO PE	OPERTIES LLC		
30031.61.		Name of Lim	ited Liability Company	
The enclosed	f Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		Kristi Jo Peyton		
			Name of Person	
		KAZCO PROPERTIES LI	LC	
			Firm/Company	+ 4 ·
		7317 Little Rd.		
			Address	·
		New Port Richey, FL 3465	34	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notifi	cation)
For further in	nformation co	oncerning this matter, please co	all:	
Kristi Jo Pey	rton		727 243-6998	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
\$25.00 F	iling 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:

TO:

Registration Section

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**

KAZC	'n	DR	Ω) L'D	1.1	EQ.	1.1	C
17.77.7	- ` '	1 1/	\/	1,15		7	1 . 1	

/Numa of the Lim	itad Liability Campa	n					
(<u>.vanc a tic fain</u>	(A Florida Limited I	ny as it now appears on our re liability Company)	corus.)				
The Articles of Organization for this Limited I Florida document number $\frac{1.08000059099}{1.08000059099}$	Liability Company	were filed on JUNE 16, 20	08	_ and assigne	ed		
This amendment is submitted to amend the fol	lowing:						
A. If amending name, enter the new name	of the limited liab	ility company here:					
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the designation "	LLC" or the abbrev	riation "L.L.C."	 —		
Enter new principal offices address, if appli	cable:	7317 Little Rd.					
(Principal office address MUST BE A STRE		New Port Richey, FL 3465	24				
Enter new mailing address, if applicable:		7317 Little Rd.					
(Mailing address MAY BE A POST OFFICE	New Port Richey, FL 34654						
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	Kristi Jo Peytor	<u>:</u>	ords, enter the	17	the ne		
New Registered Office Address:	7317 Little Rd.	Enter Florida street aa	Lleven 33	<u></u>			
	New Port Riche		, Florida ³⁴⁶⁵⁴				
		City		Zip Codes			
New Registered Agent's Signature, if changing	Registered Agent:		~-<	CI O			

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 605, 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.

g Registered Ageny Signature of No

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

• MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Gregory P. Zaino	7330 Hatteras Dr.	
		Hudson, FL 34667	■ Remove
			☐ Change
MGR	Kristi Jo Peyton	7317 Little Rd.	∃ Add
		New Port Richey, FL 34654	Remove
			Change
			D Add
			☐ Remove
			Change
			Remove
			□ Change
			☐ Remove
			□ Change
			□ Remove
			☐ Change

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed									
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies. The 90th day after the record is filed.	11/1-		\bigcirc	5					
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Typed or printed name of signee

Filing Fee: \$25.00