## L08000062604

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Objection Figure 1)				
PICK-UP WAIT MAIL				
•				
(Business Entity Name)				
(Document Number)				
•				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
2				
A. LUNT				
AUG <b>24</b> 2009				
EXAMINER				

Office Use Only



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08/21/09--01009--011 \*\*25.00

2009 AUG 21 PH 3: 02
SECRETARY OF STATE
ALLAHASSEF, FLORIDA

FILED

## **COVER LETTER**

TO:

TO:	Registration Sec Division of Corp				
SUBJECT: HOMESTEA			KIA HOLDINGS, LL		
			ed Liability Company		-
The end	closed Articles of A	Amendment and fee(s) are subr	mitted for filing.		
Please 1	return all correspor	ndence concerning this matter t	to the following:		
			Ricardo Dager		_
			Name of Person		
			Firm/Company		2009 AUG 21 PH 3: 02 SECRETARY OF STATE TALLAHASSEE, FLORID
14021 S.W. 143 Court, #6		5	IG 21		
			Address		E. T.
		N	liami, Florida 33186 City/State and Zip Code	· <del> / · · · · · · · · · · · · · · · · · </del>	3: 0 STAT LORI
		da	ger610@yahoo.com		- Om <b>2</b>
For furt	her information co	ncerning this matter, please ca	•	i notification)	
	Ric	ardo Dager	at ( 305 )	858-2858	
	Name of	Person		Paytime Telephone Numb	ber
Enclose	ed is a check for the	e following amount:			
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	Certifi closed) Certifi	Filing Fee, cate of Status & ed Copy onal copy is enclosed)
	Registra Division P.O. Bo	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314	Registration S Division of C Clifton Build	Corporations	

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HOME	STEAD KIA	HOLDINGS, L	LC		_	
(Name of the Limite	A Florida Limited I	ny as it now appears Liability Company)	on our records.			
The Articles of Organization for this Limited I. Florida document number		were filed on	June 26, 2008	and	d assign	ed
This amendment is submitted to amend the following	lowing:					
A. If amending name, enter the new name o	f the limited liab	ility company here	:			
The new name must be distinguishable and end was "L.L.C."	ith the words "Limi	ited Liability Compan	y," the designation "	LLC" or	the abbr	eviation
Enter new principal offices address, if applic	cable:	14021 S.W. 14	3 Court, #6	₹.	2	
(Principal office address MUST BE A STREI	ET ADDRESS)	Miami, Florida	33186	E	<b>189</b>	
_				AHA AHA	au	
				ARY SSE	2	
Enter new mailing address, if applicable:	14021 S.W. 14	3 Court, #6	L.C.	<b>-</b>	m	
(Mailing address MAY BE A POST OFFICE	Miami, Florida	33186	105 105	ယ္		
				REAL PROPERTY OF THE PROPERTY	02	
B. If amending the registered agent and/ registered agent and/or the new registered o	or registered of ffice address her	fice address on ou <u>e</u> :	r records, <u>enter</u>	the nam	<u>ie of th</u>	ie nev
Name of New Registered Agent:	Name of New Registered Agent: Ricardo Dager					
New Registered Office Address:	14021 S.W.	21 S.W. 143 Court, #6				
•		Ente	r Florida street add	dress		
		Miami	, Florida	<del></del>	186	
•		City		Zip C	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 = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add
			Add Remove
<del>,</del>	<u> </u>		Add Remove
			Add Remove
		7 7 7	SE AGE
D. If amend	ling any other information, enter change(	s) here: (Attach additional sheets, if necessary)	E PR 3.
Dated			_
		r authorized representative of a member cardo Dager printed name of signee	<del></del>

Page 2 of 2

Filing Fee: \$25.00