(Requestor's Name)				
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OCT 22 2009

EXAMINER



300161750253

10/21/09--01005--004 **25.00

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: CKH R.E. HOLDINGS, L.L.C.					
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:					
KAREN HENRY					
Name of Person					
Firm/Company					
89 BROWNSTONE LANE					
Address					
PALM CORST, FL 32137 City/State and Zip Code					
KC-Henry@Cfl. Fr. Com					
E-mail address: (to be dsed for future annual report notification)					
For further information concerning this matter, please call:					
KAREN HENRY a1 (386) 446-3874					
Name of Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$55.00 Filing Fee & \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ Certified Copy \\ \text{(additional copy is enclosed)}\$\$ (additional copy is enclosed)					
MAILING ADDRESS: STREET/COURIER ADDRESS:					
Registration Section Registration Section Division of Corporations Division of Corporations					
P.O. Box 6327. Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					
Tallahassee, FL 32301					

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CKH R.E. HOLDING	TS, L.L.C. npany'as it now appears on o	our records.)	
(A Florida Limit	ed Liability Company)	,	
The Articles of Organization for this Limited Liability Comp. Florida document number <u>L0800073940</u> .	oany were filed on <u>8-1</u>	-2008 and as	signed
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
C.K.H PRO SERUICES,	110		
The new name must be distinguishable and end with the words "	Limited Liability Company," t	he designation "LLC" or the	abbreviation
"L.L.C."		er en	_
Enter new principal offices address, if applicable:		0	NS_
(Principal office address MUST BE A STREET ADDRESS	5)	90	SIO
		<u>N</u>	
Enter new mailing address, if applicable:		P	
(Mailing address MAY BE A POST OFFICE BOX)			12277 12271
		ထ တ	
			7
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	l office address on our ro here:	ecords, enter the name	of the new
Name of New Registered Agent:			· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:			
	Enter Flo	orida street address	
		, Florida	
	City	Zip Cod	2

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

MGRN	MGRM = Managing Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action			
			Add Remove			
			Add Remove			
			Add Remove			
-			Add Remove			
			Add Remove			
			Add Remove			
D. If a		(s) here: (Attach additional sheets, if necessary.)	_			
	Company's purpose cho	inged from Real Estate rofessional Services/	<u>, </u>			
	Investment to Pi	rofessional Services/	_			
	Consulting.		_			
		·	_			
Dated _	October 19 , 200	9	_			
	Rom He					
	KAREN HENRY	or authorized pepresentative of a member or printed name of signee				
	ryped o	a printed name of signee				

Page 2 of 2

Filing Fee: \$25.00