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SECHETARY OF STATE

M. THOMAS

SEP - 5 2008

EXAMNET

COVER LETTER

TO: **Registration Section Division of Corporations**

Kane Holdings, 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:

Eric Kane, Es Q

Kane Holdings, LLC

20301 West Country Club DR #2222

Aventura, FL 33/80
(City/State and Zip Code)

For further information concerning this matter, please call:

at (95 /) 2 70 - 2 2 4/ (Area Code & Daytime Telephone Number)

Enclosed is a check for the 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

Kane Holdina	5, LLC	
(<u>Name of the Limited Liability Con</u> (A Florida Limit	mpany as it now appears on outed Liability Company)	<u>ir records.</u>)
The Articles of Organization for this Limited Liability Comp Florida document numberL08000081145	oany were filed on Avgus	† 25, 2006 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and end with the words "l"L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		e designation "LLC" or the abbreviation
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	(Enter Fl	orida street address)
		, Florida
	(City)	(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 Title Title <u>Name</u> <u>Address</u> Eric Kane MGRM Add Remove Add 🗖 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00