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C. LEWIS

JUL 1 2 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:	KEMPO MO	O DUK KWAN LLO)		
•	Name of Lim	Name of Limited Liability Company			
The enclosed Article	es of Amendment and fee(s) are su	bmitted for filing.			
Please return all cor	respondence concerning this matter	r to the following:			
		MELVIN SANTIAGO	•		
		Name of Person			
•	KEMF	PO MOO DUK KWAN	LLC		
		Firm/Company			
	4667 O	LD PLEASANT HILL I	ROAD		
		Address		·	
	P	OINCIANA, FL 34758			
		City/State and Zip Code			
	E-mail address: (to be used for future annual repo	ort notification)		
For further informat	tion concerning this matter, please	call:	· :		
M	ELVIN SANTIAGO	at (_407_)	962-9062 Daytime Telephone Nu		
Ŋ	ame of Person	Area Code &	Daytime Telephone Nu	mber ·	
Enclosed is a check	for the following amount:				
\$25.00 Filing Fe	_	\$55.00 Filing Fee & Certified Copy (additional copy is en	Cert) Filing Fee, ificate of Status & ified Copy itional copy is enclosed)	
MAILING ADDRESS: Registration Section Division of Corporations		Registration	COURIER ADDRES	S:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

KEMPO MOO DUK KWAN LLC

SECRETARY OF STATE

The Articles of Organization for this Limited Liability Company	were filed on	10/22/2008	and assigned	
Florida document numberL08000099281				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lial	bility company her	e:		
AMERICAN JU-JITS	SU ACADEMY LI	_C		
The new name must be distinguishable and end with the words "Lim" "L.L.C."	nited Liability Compa	ny," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:		,		
(Principal office address MUST BE A STREET ADDRESS)		1		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		our records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:	·			
New Registered Office Address:	<u>-</u>			
	Eni	ter Florida street add	ress	
,	, Florida			
	City	!	Zip Code	
New Registered Agent's Signature, if changing Registered Agent	t:			

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

MGR = Manager MGRM = Managing Member **Title** <u>Name</u> <u>Address</u> Type of Action _ Add Remove ☐ Add ☐ Remove ☐ Add Remove سي. مد د Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member **MELVIN SANTIAGO** Typed or printed name of signee

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:

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Filing Fee: \$25.00