## L08000109382

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DIVISION OF CORPORATION

10 FEB 19 PM 2: 29

T. HAMPTON
FEB 2 2 2010

EXAMINER

## **COVER LETTER**

Division of Corporations
SUBJECT: K&G HOMES 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:
GLORIANM EDVARDSEN Name of Person
Name of Person
K&G HOMES LLC
K&G HONES LLC Firm/Company
820 NE 12 AVE Address
Address
Pomparo BERCH FL 33060  City/State and Zip Code  MEDV @ BELL SOUTH. NET  E-mail address: (to be used for future annual report notification)
City/State and Zip Code
/1EDV @ BELL SUTH. NET
For further information concerning this matter, please call:
Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee,
Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
``````````````````````````````````````

TO: Registration Section

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

K&G	HOMES	LLC			
(Name of the Limited (A	Liability Company Florida Limited Lia	as it now appears oblity Company)	on our records.)		
,			25		
The Articles of Organization for this Limited Li	iability Company w	ere filed on	16-2008	_ and assig	zned
Florida document number <u>L 0900010</u>					
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name o	f the limited liabili	ity company here:			
The new name must be distinguishable and end wit "L.L.C."	th the words "Limite	d Liability Company	," the designation "LL	.C" or the ab	breviation
Enter new principal offices address, if applic	able:				
(Principal office address MUST BE A STREE	TADDRESS)				<u>=</u>
				<u> </u>	13.5 13.5 13.5 13.5 13.5 13.5 13.5 13.5
				F	是常
Enter new mailing address, if applicable:				<del>-</del>	931
(Mailing address MAY BE A POST OFFICE	BOX)				TEXTE
mutung uduress max DD/11 651 61 1100	<u> DUNI</u>			<del></del>	200
				ලා . 	
B. If amending the registered agent and/	or registered offi	ce address on our	r records, enter th	6-701	
registered agent and/or the new registered of	ffice address here:		- 10001 day <u></u>	<u> </u>	<del>o</del>
Name of New Registered Agent:	GLORIA	gnn ED	VARUSEN		
New Registered Office Address:	820 M	- 12 AVE Enter	Florida street addr		
	0 .01	Proce	·/	22_/	· _
	howhy	NO DEFICE	, Florida	Zip Code	<u></u>
New Registered Agent's Signature, if changing					

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.

Changing Registered Agent, Signature of New Registered Agen

Page 1 of 2

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 <u>Title</u> Name <u>Address</u> Type of Action MGR □ Add Remove ☐ Add Remove ☐ Add Remove Remove ∐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