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EXAMINER



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09/06/11--01008--006 **25.00

COVER LETTER

TO: Registratio Division of	on Section Corporations			
SUBJECT: _	KENNED	/ & SANTINO, P.L.		
		nited Liability Company	· · · · · · · · · · · · · · · · · · ·	
The enclosed Article	s of Amendment and fee(s) are so	ibmitted for filing.		
Please return all corn	espondence concerning this matte	er to the following:		
		P. TODD KENNEDY		
		Name of Person		
KENNEDY & SANTINO, P.L.				
Firm/Company			Securior State Control of the Contro	
	1675 PALM	1675 PALM BEACH LAKES BLVD. STE 700		
		Address		
WEST PALM BEACH, FL 33401				
City/State and Zip Code				
kennedy@kennedypllaw.com E-mail address: (to be used for future annual report notification)				
For further informatio	on concerning this matter, please			
P	P. Todd Kennedy		683-2484	
Nan	ne of Person	Area Code & Daytim	e Telephone Number	
Enclosed is a check for	or 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
266) Executive Center Circle Tallahassee, FL 32301

K

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KENNE	<u>DY & SANTINO, P</u>	<u>.L</u>
(<u>Name of the Limited Liabi</u> (A Flori	lity Company as it now apped da Limited Liability Company	cars on our records.)
·	. ,	,
The Articles of Organization for this Limited Liabilit	y Company were filed on _	January 16, 2009 and assigned
Florida document numberL0900005136	<u> </u>	
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the l	imited liability company h	ere:
THE KEN	NNEDY LAW FIRM, P.	L.
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Com	pany," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		ALE =
(Principal office address MUST BE A STREET AD	DRESS)	AR CO
		ASS - I
		m≤ = m
Enter new mailing address, if applicable:		70 = 0
(Mailing address MAY BE A POST OFFICE BOX)		ORE S
	<u> </u>	S
B. If amending the registered agent and/or regressions and/or the new registered office a		our records, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	I	Enter Florida 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 **Title** Name 1 **Address Type of Action** Remove Add Remove ☐ Add Remove Add Remove \square Add Remove ∭Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) eptember 1 Signature of a member or authorized representative of a member P. TODD KENNEDY Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00