## LU9000011688

. (Re	equestor's Name)		
(Ac	idress)		
(Ac	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Ві	ısiness Entity Nar	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



500160171755

09/16/09--01033--008 \*\*25.00

09 SEP 16 AH 9: 02

CIVISION OF CORPORATIONS

B. KOHR

SEP 1 8 2009

**EXAMINER** 

## COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:	KOPF E	Equipment LLC	
	Name of Limi	ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	09 SEP 16 AM 9: 02
Please return all corresp	ondence concerning this matter	to the following:	(A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B
			丑
		Linda K. Adler, Esq.	مِي السام الم
		Name of Person	02
		Adler Group Inc.	
		Address	
		Miami, Florida 33172	
		City/State and Zip Code	
	bferr	andez@adlergroup.com to be used for future annual report notificat	<del></del>
		•	10N)
For further information	concerning this matter, please of	eall:	•
	tty Fernandez	#: (	92-4051
Name	of Person	Area Code & Daytime T	elephone Number
Carles d'a calante	al - C-IIi		
Enclosed is a check for	•		
\$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

	٠.		
			0 2/20
KOPF	Equipment LLC		3.5 Slove
( <u>Name of the Limited Liability</u> (A Florida	y Company as it now appea Limited Liability Company)	rs on our records.)	TO GAST
			6 6
The Articles of Organization for this Limited Liability C	Company were filed on	02/04/2009	and assigned $\mathcal{L}_{\mathcal{A}}$
Florida document numberL0900011688	<b></b> .·		and assimped of or
			2
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	itad liability company ho	rai	
A. It amending hame, enter the new hame of the hin	пен павшу сощрану пе	<u>re</u> .	
The new name must be distinguishable and end with the wo	rda "Limitad Liability Comp	any " the designation "1	I C" or the abbreviation
"L.L.C."	rds Emilied Elability Comp	any, the designation is	LC of the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDI	-		
Trucipa office datress most be A STREET ADDI	<u>(E33)</u>		
		···	
Enter new mailing address, if applicable:			
	Maria —		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regis	tered office address on	our records enter t	he name of the nev
registered agent and/or the new registered office add		our records, enter t	ne name of the nev
Name of New Registered Agent:			
Nov Designand Office Address			<del></del>
New Registered Office Address:		nter Florida street add	ress
	<del>-</del> -		
	City	, Florida	7in 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 se 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>	<u>Name</u>	Address	Type of Action
MGRM	Michael M. Adler	1400 NW 107th Avenue Fifth Floor Miami, Florida 33172	Add Remove 
MGR_	KOPF Equipment Manager, LLC	1400 NW 107th Avenue Fifth Floor Miami, Florida 33172	✓ Add Remove
			Add Remove
	·		Add Remove
	<del></del>		Add Remove
			Add Remove
D. If amendi	ng any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	
	September 🂢 200	9	
-	Signature of a member o	r authorized representative of a member	· 
		r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00