

L09000016266

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

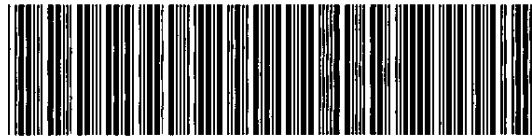
(Business Entity Name)

(Document Number)

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09 JUN 30 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

JUL 2 - 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Diversified Prosperity 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:

Richard Kanyago

Name of Person

Diversified Prosperity LLC

Firm/Company

4908 Eaglesmere Dr. #214

Address

Orlando FL 32819

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Janet Gitau

Name of Person

at (407)

443-6044

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Diversified Prosperity LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 2/17/2009 and assigned

Florida document number 600143452216 LC900016266

FILED
JUN 30 2009
TALLAHASSEE
SECRETARY OF STATE

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 "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Richard Kanyago

4908 Eaglesmere Dr. #214

Orlando FL 32819

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4908 Eaglesmere Dr. #214

Orlando FL 32819

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Richard Kanyago

New Registered Office Address:

4908 Eaglesmere Dr. #214

Enter Florida street address

Orlando

City

, Florida

32819

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:

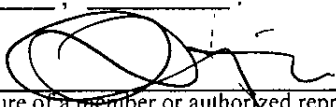
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Douglas Mutugi	10609 Leader Lane Orlando FL 32825	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Susan Naipano	979 S. Kirkman Rd # 34 Orlando FL 32811	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	James Apina	1449 S. Kirkman Rd # 2020 Orlando FL 32811	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Agnes Gatiba	5572 Arnold Palmer Dr #315 Orlando FL 32811	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Mwangi Kiberenge	5536 Metrowest Blvd #211 Orlando FL 32811	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Rosemary Mbugua	6032 Raleigh St. #2208 Orlando FL 32835	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 6/23/2009



Signature of a member or authorized representative of a member

Janet Gitau

Typed or printed name of signee

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