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| (Requ                                   | uestor's Name)  |             |  |  |
|---|-----------------|-------------|--|--|
| (Addr                                   | ess)            |             |  |  |
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| (City/                                  | State/Zip/Phon  | e #)        |  |  |
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**EXAMINER** 



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## **COVER LETTER**

|                      | ion Section<br>of Corporations  |   | • •  |
|----------------------|---|---|--|
| SUBJECT:             | 161   | 9 Derbyshire, LLC   |  |
| SUBJECT:             |   | nited Liability Company   |  |
| The enclosed Artic   | les of Amendment and fee(s) are su  | ubmitted for filing.  |  |
| Please return all co | rrespondence concerning this matte  | er to the following:  |  |
|                      |   | Kevin Kaiser  |  |
|                      |   |   |  |
|                      |   | 1619 Derbyshire   |  |
|                      |   | Firm/Company  |  |
|                      |   | 301 Apache Trail  |  |
|                      |   | Address   |  |
|                      | Oı  | rmond Beach, FL 32174   |  |
|                      |   | City/State and Zip Code   | <del></del>  |
|                      | Ke<br>E-mail address:   | evinKaiser53@msn.com<br>(to be used for future annual report notifice   | tion)  |
| For further informa  | tion concerning this matter, please   | -   |  |
|                      | Kevin Kaiser  | at ( 386 ) 5  | 66-1885  |
| N                    | ame of Person   | Area Code & Daytime   | Telephone Number   |
| Enclosed is a check  | for the following amount:   |   |  |
| \$25.00 Filing Fo    | ee \$\int_\$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) |
| R<br>D<br>P          | IAILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314 | STREET/COURIEJ Registration Section Division of Corporati Clifton Building 2661 Executive Cent Tallahassee, FL 3230 | ions<br>er Circle  |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| 1619 De<br>(Name of the Limited Liability Compa<br>(A Florida Limited)   | rbyshire<br>my as it now appears on our rec | cords.)                                   |              |
|--|---|---|--------------|
| (A Florida Limited )   | Liability Company)                          | manadam,                                  |              |
| The Articles of Organization for this Limited Liability Company  | were filed on12/08/                         | 2009 and assi                             | gned         |
| Florida document numberW0900053525   |   |   |              |
| This amendment is submitted to amend the following:  |   |   |              |
| A. If amending name, enter the new name of the limited liab  | oility company here:                        |   |              |
| BKN Investmen  | TIS, LLC                                    |   |              |
| The new name must be distinguishable and end with the words "Lim" L.L.C."  | ited Liability Company," the desi           | gnation "LLC" or the ab                   | breviation   |
| Enter new principal offices address, if applicable:  | 301 Apache Trail                            | e <sup>ta</sup> eikis <sub>ki ji</sub> ji |              |
| (Principal office address MUST BE A STREET ADDRESS)  | Ormond Beach, FL 321                        | 174                                       | 10           |
|  |   | 0   | SE           |
|  |   | 83  | 오줌           |
| Enter new mailing address, if applicable:  | 301 Apache Trail                            | -5  | SATA<br>SATA |
| (Mailing address MAY BE A POST OFFICE BOX)   | Ormond Beach, FL 321                        | 174 😏                                     | 300          |
|  |   | <u> </u>                                  |              |
|  |   | 5   | 1            |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her |   | , enter the name of                       | the new      |
| registered agent and/or the new registered office address her  | <u>e</u> .                                  |   |              |
| Name of New Registered Agent:  |   |   |              |
| New Registered Office Address:   |   |   |              |
| New Registered Office Address.   | Enter Florida s                             | treet address                             |              |
|  | . FI  | orida                                     |              |
|  | 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

| itle           | <u>Name</u>                                       | <u>Address</u>                                  | Type of Action    |
|----------------|---|---|-------------------|
| ·              |   |   | Add Remove        |
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| ). If amen     | ding any other information, e                     | enter change(s) here: (Attach additional sheets | i, if necessary.) |
| ). If amen<br> | ding any other information, e                     | enter change(s) here: (Attach additional sheets | s, if necessary.) |
| o. If amen     | December 26                                       | enter change(s) here: (Attach additional sheets | s, if necessary.) |

Page 2 of 2

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