L100000 8337

estor's Name)				
ess)				
ess)	·			
State/Zip/Phone	e #)			
☐ WAIT	MAIL			
ness Entity Nan	ne)			
(Document Number)				
Certificates	of Status			
Special Instructions to Filing Officer:				
	ess) Etate/Zip/Phone WAIT mess Entity Nam ment Number) Certificates			

Office Use Only



500192268805

01/27/11--01027--005 **30.00



T. CLINE
JAN 2 8 2011
EXAMINER

COVER LETTER

то:	Registration Sect Division of Corpo			
SUBJI	ECT: VES	CNON WALL Name of Limi	ACE LLC ited Liability Company	 .
The en	closed Articles of A	mendment and fee(s) are sul	omitted for filing.	
Please	return all correspond	lence concerning this matter	to the following:	
		KICHAK	Name of Person	
			Firm/Company	
		13130	Address North	
		ST. PETI CAVALKI E-mail address: (EXSIDIXCA, FL 33. City/State and Zip Code CockETMANL, Corto be used for future annual report notification	WILLIAM 27 MAN SERVER FOR STATE OF STAT
For fur	ther information con	cerning this matter, please o	eall: (727) 540-986	
	Name of P	LACK	at (Area Code & Daytime Tele	
Enclose	ed is a check for 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
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

VERNON WALLAC	E 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 velocida document number <u>L1000008337</u> .	vere filed on $\frac{5000}{2000}$ and assigned				
This amendment is submitted to amend the following:					
A. If amending name, <u>enter the new name of the limited liabil</u>	ity company here:				
KNOMSALLLC The new name must be distinguishable and end with the words "Limite					
The new name must be distinguishable and end with the words "Limite L.L.C."	d Liability Company," the designation "LLC" or the abbreviation				
Enter new principal offices address, if applicable:	12120 28TH ST				
(Principal office address MUST BE A STREET ADDRESS)	ST. PETEKSBUKG, FL				
	33718 33716				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12120 28TH ST FE TO TO ST. PETEYSBURG, FLETT 2 TO THE 33716 ST. 7				
B. If amending the registered agent and/or registered office egistered agent and/or the new registered office address here:	ce address on our records, enter the name of the new				
Name of New Registered Agent:	ED LACK				
New Registered Office Address: 12120	28TH ST Enter Florida street address 35716				
	PETEVSISURG, Florida 35 118 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Man MGRM = Ma	ager anaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	VERNON WALLACE LIC	1126 KINGSBOYO DR N ST. PETEXSBUKG, FL 33702	Add Remove
<u>Myr</u>	Thomas Fagar	_12120 28th St _ St. Petersburg 151. 33714	Add Remove
MEKM	KICHARD LACK	12120 28TH ST ST. PETERSBURG, FL 33718 35716	
			Add Remove
		The Co	Add Remove
		LLANAS:	Add Add
D. If amendi	ng any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
			-
Dated	, 120/	2	
-	V.V.L. DV.D	or authorized representative of a member PCK or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00