L10000045595

(Re	equestor's Name)			
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D. BRUCE

MAY 12 2010

EXAMINER

To Whom It May Concern,

I am the owner of both of these Entities (BB KAT Holdings, Inc. & Consumer Liability Reporting Services, LLC). When forming both, I accidentally formed them backwards, forming the intended LLC as a Corporation and the intended Corporation as an LLC. Therefore I am requesting to change the names of each to the other. BB KAT Holdings, Inc will become Consumer Liability Reporting Services, Inc & Consumer Liability Reporting Services, LLC will become BB KAT Holdings, LLC. If you have any further questions, please call me directly at (954) 764-7064.

Thank You.

Signed Adam Bayer

TENTETARY OF STATE ALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 5, 2010

ADAM BAYER 2972 NW 60TH ST FT. LAUDERDALE, FL 33309

SUBJECT: CONSUMER LIABILITY REPORTING SERVICES, LLC

Ref. Number: L10000045595

10 MAY 12 PH 4: 28

We have received your document for CONSUMER LIABILITY REPORTING SERVICES, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 410A00011207

COVER LETTER

TO:

Registration Section

Division o	of Corporations		
SUBJECT:	Consumer Liability	Reporting Services, LLC	
	Name of Limi	ted Liability Company	
	•		
The enclosed Artic	les of Amendment and fee(s) are sub	omitted for filing.	
Please return all co	rrespondence concerning this matter	to the following:	
		Adam Bayer	
		Name of Person	
	Consumer L	iability Reporting Services, LLC	200
		Firm/Company	
	2972 NW 60th St		SSS.
		Address	
	Ft.	Lauderdale, FL 33309	MY 12 PH 4:2
		City/State and Zip Code	28 RIDA
	ac	dammbayer@aol.com	
	·	to be used for future annual report notification	1
For further informa	ation concerning this matter, please c	eall:	
	Adam Bayer	at (954) 764-	7064
Name of Person		Area Code & Daytime Telep	hone Number
Enclosed is a check	for the following amount:		'•
□ \$25.00 Filing F	ee \$\sqrt{\sq}}}}}}}}}} \end{\sqrt{\sq}}}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\eqs}}}}}}}}} \sqrt{\s	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R C P	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Callahassee, FL 32314	STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Consumer Liability Re	eporting Servi	ces, LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appea Liability Company)	irs on our records.)		
The Articles of Organization for this Limited Liability Compan	y were filed on	04/28/2010	and assi	gned
Florida document number				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company he	<u>re</u> :		
BB KAT Ho	ldings, LLČ			
The new name must be distinguishable and end with the words "Lir"L.L.C."	nited Liability Comp	any," the designation "I	LLC" or the al	•
Enter new principal offices address, if applicable:			日本 日本	- Indian
(Principal office address MUST BE A STREET ADDRESS)			255 N	in and a
Enter new mailing address, if applicable:			PH 4: 2	
(Mailing address MAY BE A POST OFFICE BOX)			EDITI CO	<u>. </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he Name of New Registered Agent:		our records, <u>enter 1</u>	the name of	f the new
New Registered Office Address:				
	E	nter Florida street ada	dress	_
·		, Florida		
	City		Zip Code	<u> </u>

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 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 = Ma MGRM = N	anager Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
	· ·		C Damasus
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter cha	inge(s) here: (Attach additional sheets, if neces	TO MAY
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Dated	/hlen S	2010	<u> </u>
		Adam Bayer Ded or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00