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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Kings L anding L L C 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:
Monica D. King Name of Person 48.08 Sanoma Village Firm/Company
Orlando 7a, 32808
City/State and Zip Code Ling M 3 (a) O.C.P.S., ne + X-mail address: (to be used for fiture innual report hotification) For further information concerning this matter, please call:
To future thormation concerning this matter, piense can.
Name of Person at () Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Fiting Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Attn: Brenda Tadlock
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Cliffon Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	OF		•	1 6	芸が
Kings Land	Liability Company	LLC"	on our records.)	MAY - 7	SION OF COR
Name of the Limited 1. (A) The Articles of Organization for this Limited Lia Florida document number	ibility Company w -17685	ere filed on <u>Ma</u>	¥3,2010	and assigned	CORPORATIONS
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liabili	ty company here	:		
The new name must be distinguishable and end with "L.L.C."	ndSCap 1 the words "Limite		ly," the designation "	LLC" or the abbrevi	iation
Enter new principal offices address, if applica	ble:	4808	Sanoma VI	illage _	
(Principal office address MUST BE A STREET		Grland	<u>Sanoma VI</u> b, FL 32	3808	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE b	<u>30X)</u>				_ _ _
B. If amending the registered agent and/o registered agent and/or the new registered off			ur records, <u>enter</u>	the name of the	new
Name of New Registered Agent:	110.0				_
New Registered Office Address:	4808	<u>Sanoma</u> Ente	VIllage er Flori d a street add	dress	
	Orlan		, Florida	3808	
		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 \cdot 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 heing 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

MGR = Manager

MGRM = Managing Member

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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Bernard King	4808 Sanong Village Orlando, Fi 32808 J	Add Remove
<u>MGRM</u>	Monica King	4808 Samma Village Ovlando, El 32808	Add Remove
MARM	Nathanel Harrison	4808 Sanoma Village Orlando, Fi 38808	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ding any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	_
_			_
			- -
Dated	711 04 1		
	Signature of a member of	or authorized representative of a member	, <u> </u>
	Manica D	r printed name of signee	 _

Page 2 of 2

Filing Fee: \$25.00