L100000 77295

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SECRETARY OF STATE

J. BRYAN

SEP - 9 2011

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	JECT: KAREN GNEER MODELS, LLC Name of Limited Liability Company	
The e	enclosed Articles of Amendment and fee(s) are submitted for filing.	·
Please	e return all correspondence concerning this matter to the following:	
	LAWNENCE CAPLAN Name of Person	THE SEP-B
	LAWNEYEE A- CAPLAN, PA Firm/Company	ED WO.38
	1375 GATEWAY BLVD.	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	City/State and Zip Code L CAPLAN () LA CAPLANLAW. COM E-mail address: (to be used for future annual report notification)	26 1
For fu	urther information concerning this matter, please call:	
	Area Code & Daytime Telephone Number Area Code & Daytime Telephone Number	
Enclos	osed is a check for the following amount:	,
\$2	(additional copy is enclosed) Certified	te of Status &

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

KAREN GREER N	MODELS, LLC
(Name of the Limited Liability Compan (A Florida Limited Liability)	y as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company v	were filed on JULY 22, 2010 and assigned
Florida document number <u>L10000077295</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
KANEN GREEL MODELS AND TAKEN. 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:	
(Principal office address MUST BE A STREET ADDRESS)	
	255 8 E
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida

Zip Code

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 = N	MGRM = Managing Member					
Title	<u>Name</u>	Address	Type of Action			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
D. If amend	ing any other information, enter change(s	here: (Attach additional sheets, if necessary)	-8 AHI			
 Dated <i>SEP</i>	PTEMBER 7, 2011,	authorized representative of a member	0: 36 STATE.			
-	1/	AWNESCE A CAPLAN printed name of signee				

Page 2 of 2

Filing Fee: \$25.00