L10000093459

Imperial Kings LLC" — 1413 SW 5310 ST Miramar, FL 33027 — (954) 348-5147
·
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(macritical mile)
(Document Number)
, ,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



100185272741

09/13/10--01041--009 **25.00

10 SEP 13 PH B 38
SECRETARY OF STATE

D. BRUCE

SEP 14 2010

EXAMINER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp. (A Florida Limited	panyas it now appears on our rec d Liability Company)	cords.)	-	
The Articles of Organization for this Limited Liability Compare Florida document number L10000 92459			nd assigne	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	ability company here:			
The new name must be distinguishable and end with the words "Liu"L.L.C."	mited Liability Company," the design	gnation "LLC" o	r the abbr	eviation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ร้างกับเหติบานกลับรับ กับการแบบ การแบบ การแบบ เพลายนายกลับรับการแบบ การแบบ	10 SEP 13 PM SECRETARY OF SALLAHASSEE, FL	FILED	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		¥ 38 TATE ORIOA		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records		me of th	ie new
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida s	street address		
•	_, Fl	orida _. 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.

	MGR = Man MGRM = M	ager anaging Member	r									
	<u>Title</u>	Name	c 10	Address		Type of Action						
M	Title Name 6RM Samantha	Smith	14113 SW 53rd ST miramar, FL 33027	7	Add Remove							
						Add Remove						
						☐ Add ☐ Remove						
						Add Remove						
						Add Remove						
						∐Add Remove						
	D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)											
	Dated De	ptem ber	03 _, 20	010	SECRETARY OF STATE TALLAHASSEE, FLORIDA	FILED						
Signature of a member or authorized representative of a 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:

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00