# L10000092947

(Re	equestor's Name)	<del></del>
(Ad	ldress)	
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(Cil	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nar	me)
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2010 DEC 27 PM W 36

C. LEWIS

DEC 2 8 2010

EXAMINER

# **COVER LETTER**

SUBJECT:	KN	NHK LLC	
SUBJECT:		ted Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
		lasy Farahbakhshian	
		Name of Person	
	**************************************	KNHK LLC	
		Firm/Company	
		7630 Red River Rd	
		Address	
	Wes	t Palm Beach FL 33411	
		City/State and Zip Code	
	Kh	orassnh@yahoo.com to be used for future annual report notific	ation)
For further informatio	n concerning this matter, please c		
	anne Farrar CPA	at ( + + + )	790-2092
Nam	e of Person	Area Code & Daytime	Telephone Number
Enclosed is a check for	r 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

2010 DEC 27 PM # 36

·	KNHK LLC	PALL O	KERRITTAL ALE
( <u>Name of the Limited Lis</u> (A Flo	<b>ability Company as it now appea</b> orida Limited Liability Company)	rs on our records.)	THE COLL ! LUKIUA
The Articles of Organization for this Limited Liabi Florida document number	· · · · —	09/03/10	and assigned
This amendment is submitted to amend the followi	ng:		
A. If amending name, enter the new name of th	e limited liability company her	<u>e</u> :	
The new name must be distinguishable and end with th "L.L.C."	ne words "Limited Liability Compa	iny," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicabl	e:		
(Principal office address MUST BE A STREET A	(DDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
	<del></del>		
B. If amending the registered agent and/or registered agent and/or the new registered office	0	our records, <u>enter</u>	the name of the new
Name of New Registered Agent:	1		
New Registered Office Address:			the state of the s
	En	ter Florida street ad	dress
-	City	, Florida	Zip Code
	$c_{iiy}$		sip cour

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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action	1
MGRM	Hashem Khorassani	517 Northlake Blvd North Palm Beach, FL 33408	AddRemove	
	· 		Add Remove	
	<del>-</del>		Add Remove	
			Add Remove	
<del></del>			Add Remove	
			Add Remove	
D. If am	nending any other information, en	ter change(s) here: (Attach additional sheets, if necessar	y.) 	
			2010 DEC 2	·
	10/22/240			
Dated	12/23/20 0	f a member or a stherized representative of a member	DRIDE S	
	Nasy Farahbakshi	.an (/		
		Typed or printed name of signee	_	

Page 2 of 2

Filing Fee: \$25.00