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ONVISION OF CORPORATIONS

B. 1200 DEC 0 2 2010

## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT:	KG &	SONS LLC			
50 <b>5</b> 0501.		ted Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	DANNY PATEL				
		Name of Person			
		KG & SONS LLC			
		Firm/Company			
3730 MOBILE HWY					
		Address			
	Pi	ENSACOLA FL 32505			
		City/State and Zip Code			
	E-mail address: (	to be used for future annual report notific	cation)		
For further information	concerning this matter, please of	eall:			
	ANNY PATEL	at i	404-5129		
Name	of Person	Area Code & Daytime	Telephone Number		
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)		
Regis Divis P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cerual Tallahassee, FL 32	n ations nter Circle		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		<u>KG &amp; SONS L</u>	<u>.LC</u>			
( <u>N</u>	me of the Limited Lia (A Flo	<b>ibility Company as it</b> orida Limited Liability	t now appear Company)	s on our records.		
		•				
The Articles of Organization	for this Limited Liabi	lity Company were f	filed on	OCT 5, 2010	and assigned	
Florida document number	L1000010405	2			Slow o	
					C 45	
This amendment is submitted	to amend the following	ng:			- 6	
	4 64	. 12 - 14 - 3 10 -3-1004			2 95 P	
A. If amending name, enter	the new name of the	e limited hability co	ompany ner	<u>'e</u> :	9. 35	
					<u> </u>	<del>-</del>
The new name must be distingu "L.L.C."	ishable and end with th	e words "Limited Lia	ibility Compa	my," the designation	"LLC" or the abbrevia	tion
Enter new principal offices	address, if applicable	e:			<u> </u>	_
(Principal office address MU	I <mark>ST BE A STREET</mark> A	(DDRESS)				_
						_
Enter new mailing address,	if applicable:					
(Mailing address MAY BE A	<u> POST OFFICE BO</u>	<u></u>			<u> </u>	
						_
•						
B. If amending the regis			ddress on o	our records, <u>enter</u>	the name of the	nev
registered agent and/or the	new registered office	e address here:				
Name of New Regi	stered Agent:		<u> </u>			_
New Registered Of	fice Address:					
			En	ter Florida street a	ddress	_
				. Florida		
	-	Cit		, - 1011444 _	7in 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.

If Changing Registered Agent, Signature of New Registered Agent

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 = Managing Member <u>Title</u> <u>Name</u> <u>Address</u> **Type of Action MGRM** DIPAK R PATEL 5686 TILLMANS CORNER PKWY **√** Add MOBILE AL 36619 Remove Remove ☐ Add Remove ☐ Add Remove  $\square$ Add \_\_\_\_Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) NOVEMBER 30 2010 Dated Signature of a member or authorized representative of a member **DANNY PATEL** 

Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00