L 10000113226

<u> </u>			
(₭€	equestor's Name)		
(Ad	idress)		
(Ad	ldress)		
•			
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Bu	ısiness Entity Nar	ne)	
	·	·	
(Do	ocument Number)		
, (23	, , , , , , , , , , , , , , , , , , , ,		
Cartified Coning	Cortificator	of Status	
Certified Copies	Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:		





000188239300

12/07/10--01008--016 **25.00

10 DEC -7 PM I2: 40
SECRETARY OF STATE

B. BOSTICK
DEC 8 · 2010
EXAMINER

COVER LETTER

TO:

Registration Section

₹Division of Co	orporations		
SUBJECT:	KBZ Fina	ncial Group, LLC	
		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	oondence concerning this matter	r to the following:	
		Dave Zietz	
	·	Name of Person	
		ISD Financial, LLC	
		Firm/Company	
	PO Box 7357		10 7ALL
		Address	10 DEC
	De	elray Beach, FL 33482	ASSET 7
		City/State and Zip Code	int
	E-mail address: (ietz@isdfinancial.com to be used for future annual report notificat	PM 12: 40 OF STATE E. FLORID
For further information	concerning this matter, please of	·	40 VIE VIDA
	Dave Zietz		0183 x101
Name	of Person	Area Code & Daytime To	elephone Number
Enclosed is a check for	the following amount:		
✓ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divis P.O. I	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		ons

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KBZ Fina	ancial Group, LL	One on our records)			
(<u>Name of the Limited Liability</u> (A Florida Li	imited Liability Company)			
The Articles of Organization for this Limited Liability Co Florida document numberL10000113226	ompany were filed on	October 29, 2010	and a	ssigne	d
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limit	ed liability company h	ere:			
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Com	pany," the designation "L	LC" or the	e abbre	viation
Enter new principal offices address, if applicable:			TAL St	70	
(Principal office address MUST BE A STREET ADDRE	ESS)		ASS.	DED.	m 15129444
			35.75 00.00	\	Parameter 1
Enter new mailing address, if applicable:			EE, T	PM	
(Mailing address MAY BE A POST OFFICE BOX)			ORION	12: 40	
B. If amending the registered agent and/or registe registered agent and/or the new registered office addre		our records, enter t		of the	e new
Name of New Registered Agent:					
New Registered Office Address:	1	Enter Florida street addr	ess		
	, Florida				
	City	, riorida	Zip Co	de	—

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> **Type of Action** <u>Address</u> MGRM Heartland Financial Service 14605 S Hagan ☐ Add Olathe, KS_66062 Remove Coronado Services, LLC MGRM 14605 S Hagan Remove Olathe_KS_66062___ ☐ Add _ Remove Remove _□Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 5 2010 Dated_ Signature of a member or authorized representative of a member

Dave Zietz
Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00