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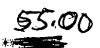
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ALLAHASSEE, FLORID

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K. SALY EXAMINER SEP 2 4 2013

COVER LETTER

TO:

Registration Section **Division of Corporations**

Kaufman & Schavey LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Larry Schavey

Name of Person

Kaufman & Schavey LLC

Firm/Company

24827 Lakemont Cove LN #103

Address

Bonita Springs, FL 34134

City/State and Zip Code

larryschavey@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Larry Schavey

at (239) 405-5151

Area Code & Daytime Telephone Number

Name of Person

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) □\$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**



Kaufman & Schavey LLC

(Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compa	ny were filed on 2/8/2010	and assigned
Florida document number L10000116548		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
Schavey LLC		
The new name must be distinguishable and end with the words "Li"L.L.C."	mited Liability Company," the de	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	·	
Enter new mailing address, if applicable:	1052 S Clear Lake D	Drive
(Mailing address MAY BE A POST OFFICE BOX)	Fremont, IN 46737	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		ds, enter the name of the new
New Registered Office Address:	Enter Florid	la street address
		Florida
 	City	Zip Code
New Registered Agent's Signature if changing Registered Age	nt•	

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 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
MGRM	Bernard Kaufman	656 Lake Drive Clear Lake	Add
		Fremont, IN 46737	Remove
			Add
			Remove
			_
			- -
	 		Add Remove
			Add
			Remove
			Add
			Remove

If amending any other information	on, enter change(s) here: (Attach additional sheets, if necessary.)
_{ted} 9/16/2013	
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	Λ
Signa	ature of a member of authorized representative of a member.
Larry Schavey	May his
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00