L11000018358

(Re	equestor's Name)	
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COVER LETTER

TO: Registration Section Division of Corpor			
SUBJECT: KBC	CONSTRUCTION Name of Limit	N, LLC	
	Name of Limit	ed Liability Company	
The enclosed Articles of Am	endment and fee(s) are subm	nitted for filing.	
Please return all corresponde	nce concerning this matter to	o the following:	
	BIJAY K. PA	ANIGRAHI Name of Person	
		Name of Person	
	KBC CONSTR	OCTION, LLC	
		Firm/Company	
•	6925 LAKE E	LLENOR DR, SUITE	126
	ORLANDO, F	FL 32809 City/State and Zip Code	
		City/State and Zip Code	
_	BPANIGRAHI(© KBCFL. COM be used for future annual report notifica	tion)
For further information conce			nony
BIJAY K. PAI	VIGR AHI	at (407) <u>506 - 4</u> Area Code Daytime Te	1015
Name of Per	eson	Area Code Daytime Te	elephone Number
Enclosed is a check for the fo	ollowing 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

KBC CONSTRUCTION, 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 Company were filed on <u>02-10-2011</u> Florida document number <u>L11000018358</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida _ City

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	SUCHITRA PANIGRAHI	6925 LAKE ELLENDR DR, STEIZ ORLANDO, FL 32809	6 th Add
			□ Remove
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	Section	- Trian	3 * *
		STATE	Add O
			_□ Change

	THE SHARES OF OWNERSHIPS ARE ASGIVEN BELOW.
-	BIJAY K. PANIGRAHI - 99°% OWNERSHIP
_	SUCHITRA PANIGRAHI - 12 OWNERSHIP
	
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te: If	e date, if other than the date of filing: 08-22-2016 (optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed and it's effective date on the Department of State's records. The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 10th day after the record is filed.
ad	August 22 2016
.u	August 22 , 2016. Signature of a member or authorized representative of a member
	BIJAY K. PANIGRAHI Typed or printed name of signee
	o de la companya del companya de la companya de la companya del companya de la co
	Page 3 of 3

Filing Fee: \$25.00