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PPROVED AND FILED

D. BRUCE

SEP 25 2012

EXAMINER

COVER LETTER

10.	Division of Co					
SUBJECT:		Kirste	en Brust LLC.			
		Name of Lim	ited Liability Company			
		f Amendment and fee(s) are sul	-			
Please re	eturn all corresp	ondence concerning this matter	to the following:			
			Name of Person			
,			Firm/Company			
			1610 Gray Bark Dr.		(n - 1	
	Address				2 SEP	
	Oldsmar, FL 34677 City/State and Zip Code			——————————————————————————————————————	P 24	<u> </u>
		kirste E-mail address: (enmurawski@gmail.com to be used for future annual report notification	n)	PH IZ:	FLED
For furth	er information	concerning this matter, please of	•	n) TOPDA	2: 22	
		sten Murawski		-2232		
	Name	of Person	Area Code & Daytime Tele	phone Number		
Enclosed	l is a check for	the following amount:				
\$25.0	\$25.00 Filing Fee \$\times\$ 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 enclo	os e d)	
		LING ADDRESS:	STREET/COURIER A Registration Section	ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kir	sten Brust LLC.		
(Name of the Limited Liabili (A Florida	ty Company as it now appear	rs on our records.	
(11.1.02100)	· Dimited Diability Company)		
The Articles of Organization for this Limited Liability	Company were filed on	2/14/2011	and assigned
Florida document numberL11000019478	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company her	<u>re</u> :	
Kirst	en Murawski LLC.		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Compa	ny," the designation "	LLC" or the abbreviation
L.L.C.			70 -
Enter new principal offices address, if applicable:			FG 2
(Principal office address MUST BE A STREET ADD	RESS)		£5 E
			24 SS 24 PT 24
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			11 N
Intelling dedress MAL DEAT OF THE BOAT			Em N
		 	
B. If amending the registered agent and/or regi	stered office address on a	ur recards enter	the name of the new
registered agent and/or the new registered office ad		di records, <u>enter</u>	the name of the new
Name of New Registered Agent:			<u> </u>
New Registered Office Address:			
Now registros office reduces.	Ent	ter Florida street add	iress
	, Florida		
	City		Zip 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, <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 **Title** <u>Name</u> <u>Address</u> Type of Action MGR Kirsten Murawski 1610 Gray Bark Dr ✓ Add ☐ Remove Oldsmar FL 34677 MGR Kirsten Brust ☐ Add ✓ Remove ☐ Add ☐ Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Kirsten Brust was divorced and legally changed her name from Kirsten Brust to Kirsten Murawski. Please see Attachment. Septmeber 21 2012 Signature of a member or authorized representative of a member Kirsten Murawski Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00