

**L11000034454**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

**L11000034454**

Office Use Only



**100209827641**

07/18/11--01016--025 \*\*43.75

FILED  
2011 AUG -1 AM 9:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**C. LEWIS**

*Aug 2* 2011  
**EXAMINER**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 19, 2011

KAREN LOVEALL / KC HOSPITALITY, LLC  
13678 WATERHOUSE WAY  
ORLANDO, FL 32828

SUBJECT: KC HOSPITALITY, LLC  
Ref. Number: L11000034454

We have received your document for KC HOSPITALITY, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any further questions concerning your document, please call (850) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 711A00017027

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: KC HOSPITALITY, 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:

**KAREN LOVEALL**

Name of Person

**KC HOSPITALITY, LLC**

Firm/Company

**13678 WATERHOUSE WAY**

Address

**ORLANDO, FLORIDA 32828**

City/State and Zip Code

**DANDKLP@MSN.COM**

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

For further information concerning this matter, please call:

**KAREN LOVEALL**

Name of Person

at ( **407** )

**739-2947**

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)

☐ \$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**

**KC HOSPITALITY, LLC**

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

**FILED**  
2011 AUG -1 AM 9:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/22/2011 and assigned  
Florida document number 111000034454.

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 end with 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)**

13678 WATERHOUSE WAY

ORLANDO, FLORIDA

32828

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

13678 WATERHOUSE WAY

ORLANDO, FLORIDA

32828

**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:**

KAREN LOVEALL

**New Registered Office Address:**

13678 WATERHOUSE WAY

*Enter Florida street address*

ORLANDO

*City*

, Florida

32828

*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.*

Karen A Loveall  
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>	<u>Type of Action</u>
MGMR	HEATHER BARKER	15520 TIMBERLINE DRIVE TAMPA, FLORIDA 33624	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGMR	WILL LOVEALL	13678 WATERHOUSE WAY ORLANDO, FLORIDA 32828	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

HEATHER BARKER TRANSFERS HER 49% OWNERSHIP INTEREST IN  
KC HOSPITALITY, LLC TO WILL LOVEALL EFFECTIVE JULY 15TH, 2011

Dated

7/25/11

*Karen Loveall*

Signature of a member or authorized representative of a member

Karen Loveall

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 AUG -1 AM 9:09

FILED