

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
L1100052480

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RE-SUBMIT

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)205-8842
Fax Number : (850)878-5368

Please retain original filing
date of submission 5/12

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED
15 MAY 14 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
KMG LANSBROOK, LLC**

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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Help MAY 15 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KMG LANSBROOK, 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:

CORY GERBRANDT

Name of Person

KMG LANSBROOK, LLC

Firm/Company

515 E. PARK AVENUE

Address

TALLAHASSEE, FL 32301

City/State and Zip Code

BTRUSKOLASKA@ESGKULLEN.COM

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

For further information concerning this matter, please call:

CORY GERBRANDT

Name of Person

850
at ()

Area Code

558-1933

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

5/14/2015 9:32:19 AM From: To: 8506176383(2/8)



May 14, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

KMG LANSBROOK, LLC
675 THIRD AVENUE SUITE 400
NEW YORK, NY 10017

SUBJECT: KMG LANSBROOK, LLC
REF: L11000052480

RE-SUBMIT

Please return original
date of submission 5/12

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Due to transmission problems, your faxed document or coversheet is illegible or incomplete. Please refax the document and cover sheet to this office for processing.

No document included. Just the cover letter and rejection letter was sent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

FAX Aud. #: E15000115657
Letter Number: B15A00010094

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TALLAHASSEE, FLORIDA

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2015 MAY 12 AM 9:19

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5/14/2015 9:32:19 AM From: To: 8506176383(3/8)
000 011 0001 07/10/2015 07:27:10 PM FAX 17001 FAX 001001



May 13, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

KMG LANSBROOK, LLC
675 THIRD AVENUE SUITE 400
NEW YORK, NY 10017

SUBJECT: KMG LANSBROOK, LLC
REF: L11000052480

RE-SUBMIT

Please retain original filing
date of submission 5/12

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

FAX Aud. #: H15000115657
Letter Number: 515A00010060

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TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA



May 12, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

KMG LANSBROOK, LLC
675 THIRD AVENUE SUITE 400
NEW YORK, NY 10017

SUBJECT: KMG LANSBROOK, LLC
REF: L11000052480

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist III

FAX Aud. #: H15000114152
Letter Number: 515A00009920

RE-SUBMIT

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date of submission 5/12

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TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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2015 MAY 12 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

KMG LANSBROOK, 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 10/21/2010 and assigned
Florida document number L11000052480.

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 "LLC."

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:

NRAI SERVICES, INC.

New Registered Office Address:

1200 SOUTH PINE ISLAND ROAD

Enter Florida street address

PLANTATION


Florida 33324

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 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.

 Signature of New Registered Agent

5/14/2015 9:32:19 AM From: To: 8506176383(7/8)

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

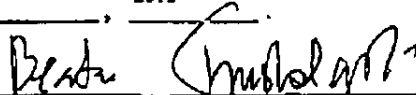
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

Page 2 of 3

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

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated APRIL 30TH, 2015



Signature of a member or authorized representative of a member

BEATA TRUSKOLASKA

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA