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SECRETARY OF STATE

SEP 1 9 2012 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: KAYA CHIPUNGU LLC Name of Limited Liability Company						
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:						
NDAIZIWEI KAYA CHIPUNGU Name of Person						
Name of Person						
KAYA CHIRUNIG LLC						
KAYA CHIPUNG LLC Firm/Company						
HAAH SPRING ROCETT AR						
4004 SPRING BREEZE DR						
ORLANDO, FLORIDA, 32829 City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
NATINEL-K. CHIDDINGO UNTUSO SURL						
NSAIZIWEI - K. CHIPUNGU at (457, 452 8484 Name of Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fce,						
Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy						
(additional copy is enclosed)						

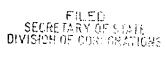
MAILING ADDRESS:

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



12 SEP 18 AM 10: 41

KAYA CHIPUNGU LLC		
KAYA CHIPUNGU LLC (Name of the Limited Liability Compar (A Florida Limited L	<u>ny as it now app</u> liability Company	ears on our records.) y)
The Articles of Organization for this Limited Liability Company Florida document number <u>£1100066412</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company l	nere:
SOCIETY TAX LLC		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Con	npany," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	SAME	ADDRESS
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	SAME	ADDRESS
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		n our records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
		Enter Florida street address
		, 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>:

	= Manager 1 = Managing Member			
<u>Title</u>	<u>Name</u>	Address	Type of Ac	<u>ction</u>
			Add	
			Kemove	
	_		Add Remove	
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			Add Remove	
			Add	
			Remove Add Remove	
D. If a	mending any other information, e	nter change(s) here: (Attach additional sheets, if necessary.)		
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Dated _	09/11/2012	·	Ē	SROLS
		of a member or authorized representative of a member		
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		I K CHIPUNGU Typed or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00