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JUL -5 2011

EXAMINER



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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:	IDC COIN A	ND BULLION, LLO	.
		ited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are su	bmitted for filing.	
Please return all co	prespondence concerning this matte	r to the following:	
		RHONDA STAMAS	
		Name of Person	
	KMA SUNB	ELT TRADING CORF	PORATION
		Firm/Company	
	36	96 ULMERTON ROA	D
		Address	
	CL	EARWATER, FL 3370	62
		City/State and Zip Code	
	RHO	NDAS@SHOPIDC.Co	OM
Fa., 641 :6		•	or nomeanon)
ror turther informa	ation concerning this matter, please	can:	
	RHONDA STAMAS	at (727)	572-7258 X 129
1	lame of Person	Area Code &	Daytime Telephone Number
Enclosed is a checl	c for the following amount:		
√ \$25.00 Filing F	ee \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
F I F	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Callahassee, FL 32314	Registration Division of Clifton Buil	Corporations ding tive Center Circle

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

IDC COIN AND B	ULLION, L	LC		_	
(Name of the Limited Liability Company (A Florida Limited Lia	<u>/ as it now appea</u> ability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Company v Florida document numberL11000070475	vere filed on	JUNE 16, 2011	and	assign	ed
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabili	<u>ity company he</u>	<u>re</u> :			
IDC COIN & BULLION O	F NASHVILLI	E, LLC			
The new name must be distinguishable and end with the words "Limite	d Liability Comp	any," the designation "I	LC" or th	ne abbi	reviation
"L.L.C." Enter new principal offices address, if applicable:			- Tu	E)	
• • •			The 122 C	<u></u>	1
(Principal office address MUST BE A STREET ADDRESS)				-	4
		 _	A T	<u>- </u>	
		į		9	j f
Enter new mailing address, if applicable:			-442 Z	3 - 	marketing.
(Mailing address MAY BE A POST OFFICE BOX)				<u>ء</u>	
			3 -		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:		our records, <u>enter t</u>	he name	<u>e of tl</u>	<u>he new</u>
Name of New Registered Agent:					
New Registered Office Address:					.
	En	nter Florida street add	ress		
		, Florida			
	City		Zip Co)de	
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, 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>	Address	Type of Action	
			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
_ 			Add Remove	
	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	_	
			_	
Dated	JUNE 28 , 20°	Allera		
		or authorized representative of a member RLOS URENA or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00