# 41000070954

(Re	equestor's Name)	
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(Ac	ldress)	<u> </u>
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D. BRUCE
JUN 28 2011
EXAMINER

## **COVER LETTER**

TO: Registration S Division of Co		•	
subject:	T SECURIT	ited Liability Company	<u> </u>
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	pondence concerning this matter	r to the following:	
	Vasilis	Name of Person	
	KT SECURI	TY LC Chentauro	os Team Secucity, (LC)
	1218 Clevelo	Address	
	Clearwater, Mtsecurity ser	FC, 33781 City/State and Zip Code	H JUN
	KtSecucity sec E-mail address: (	to be used for fullure annual report notifica	tion) 27
For further information	concerning this matter, please of		FISH TO
Vasilis Ne	of Person	at (727) - 687 - 72 Area Code & Daytime 1	262
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

KT SECURITY	I, LLC		
( <u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.) iability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L 11 0000 70954</u>	were filed on 1754NC 2011	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil HENTAUROS TEAM S  The new name must be distinguishable and end with the words "Limit "L.L.C."	SECURITY LLC	LLC" or the abbrevia	_ tio
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	1218 Cleveland Clearmater, FC,	St. 33755	_
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	Same as above		_
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		the name of the r	<u>1ev</u>
Name of New Registered Agent:	NA		
New Registered Office Address:	Enter Florida street add	TO THE PARTY OF TH	_
	, Florida		_
New Registered Agent's Signature, if changing Registered Agent:	City	OZIP Code	

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 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 = M MGRM =	lanager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	,		Add Remove
<del></del>	- ITA		Add Remove
<del>,</del> _			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If ame	nding any other information, enter change	(s) here: (Attach additional sheets, if necesse	ערנג.)
-	NA		HA LZ NIN 11.
Dated	Closel Wal		CORD T
	Vasilios Ne	or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00