1/1000/02683

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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(Document Number)				
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Special Instructions to Filing Officer:				
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A. LUNT				

Office Use Only



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COVER LETTER

Division of Co	orporations	•	•		
SUBJECT:	Kintaro Ca	pital LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.			
Please return all corresp	ondence concerning this matter	r to the following:			
	7	ired Solf			
		Name of Person			
	ki	ntero Capital Firm/Company		2012 FLL	
		Firm/Company		2012 HAR 30 SECAL IAR BLUAHASS	
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	E-mail address:	to be used for future annual report notifica	tion)		
For first or information		·	tion)		
ror turther information	concerning this matter, please of	zan:			
		at (
Name	of Person	Area Code & Daytime T	elephone Number		
		•			
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	losed)

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 ARTICLES OF ORGANIZATION **OF**

Kintaro Capi				
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	<u>r as it now</u> ibility Con	appears on our red pany)	<u>cords.</u>)	
The Articles of Organization for this Limited Liability Company work and the Company of the Articles of Organization for this Limited Liability Company work and the Company of the Articles of Organization for this Limited Liability Company work and the Company of the Articles of Organization for this Limited Liability Company of the Articles of Organization for this Limited Liability Company of the Articles of Organization for this Limited Liability Company of the Articles of Organization for this Limited Liability Company of the Articles of Organization for this Limited Liability Company of the Articles of Organization for this Limited Liability Company of the Articles of Organization for this Limited Liability Company of the Articles of Organization for the O	vere filed	on 9/8/11	<u></u>	_ and assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability of the Capital LLC	ity compa	ny here:		
he new name must be distinguishable and end with the words "Limite L.L.C."	d Liability	Company," the des	ignation "LL	
Enter new principal offices address, if applicable:				2012 MAR
Principal office address MUST BE A STREET ADDRESS)		Sarre	- <u> </u>	\$ 71
			\$1.7 mg	30
			المجارة المجارة المجارة	= 11
Inter new mailing address, if applicable:			10 5	9
Mailing address MAY BE A POST OFFICE BOX)		Sanc	ngan musik dan 1967 1	9
B. If amending the registered agent and/or registered office egistered agent and/or the new registered office address here:		s on our records	s, <u>enter the</u>	name of the ne
Name of New Registered Agent:				
New Registered Office Address:		Enter Florida	street addres	ss
		F	lorida	
•	City	, a.,		Zip Code
lew 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 timited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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>:

MGR ⇒Manager

<u> Citle</u>	<u>Name</u>	Address	Type of Action
			Add Remove
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			Add Remove
			Add Remove
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). If amer	nding any other information, enter cha	nge(s) here: (Attach additional sheets, if ne	Remove
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Dated	3/27/12		
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Filing Fee: \$25.00