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SECRETARY OF STATE
FALL AHASSEE, FLORID

K.SALY EXAMINER JUL - 5 2013

COVER LETTER

то:	Registration Sec Division of Corp	ction · porations		
SUBJ!	ECT:	KL Res, LL Name of Limi	ted Liability Company	,
The er	nclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		R9	Iph Serrano Name of Person	
		K	L Res. LLC Firm/Company	
			21 Alton Rd, #5 Address Yigmi Beach, FL 3. City/State and Zip Code	29
			City/State and Zip Code	3139
		E-mail address: (to be used for future annual report notificati	ion)
For fu	rther information co	oncerning this matter, please of	call:	
	Ralph Name of	Sergno Person	at (<u>786) 479 -</u> Area Code & Daytime Te	2432 Elephone Number
Enclo	sed is a check for th	e following amount:		
)	5.00 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

F11 ~

ARTICLES OF UR	(GANIZATION 73 na	$\sim \varepsilon D$
OF	JUL 300	. 49
	· Secure	PHIN
.	ALLAUA	1880 - 18
(Name of the Limited Liability Company (A Florida Limited Liability Company)	S ~~~AS	TARY OF STATE
(Name of the Limited Liability Company	as it now appears on our records.)	TE ORINE
(A Florida Limited Lia	ibility Company)	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability Company v	vere filed on 09/07/2011	and assigned
1 11000 10 3 2 6	 /	
Florida document number <u>L 11000 1 0 3 2 5 9</u> .		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabil</u>	<u>ity company here</u> :	
The new name must be distinguishable and end with the words "Limite	d Liability Company," the designation "LL	C" or the abbreviation
L.L.C."		
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Trinciput Office unuress moor DE 71 OTRIBET 71DD (CDS)		
	_	
Enter new mailing address, if applicable:		
(Mailing address MAV DE A DOCT OFFICE DOV)		
(Mailing address MAY BE A POST OFFICE BOX)		
	,	
The FO 10 10 10 10 10 10 10 10 10 10 10 10 10		C 4b
B. If amending the registered agent and/or registered offi		e name of the new
registered agent and/or the new registered office address here	•	
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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
MGR	Gershen baum, Eric	1521 AHm Rd, #529	Add
		Highi Beach, FL 33139	Remove
<u>MGR</u>	Gershenbaum, Samuel	1521 AHon Rd, #529 Mismi Beach, FL 33135	
			Add Remove
			Add Remove
			Add Remove
			Add
			Kemove

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	<i></i>
Dated _	June 28, 2013.
	Deph Seu
	Signature of a member or authorized representative of a member
	Reph Serrano Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00