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FILED 2011 NOV 18 PM 3: 28 SECKETARY OF STATE TALLAHASSEE. FLORIDA



EXAMINER

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	t	COVER LETTER		
TO:	Registration Section	n (2) (2) (2) (2) (2) (2) (2) (2) (2) (2)		
	·	SAMALI MANAGEMENT, LLC		
SUBJI		Name of Limited Liability Company		
<b>1</b> 11	North A. M. Lee, and American American	1 for (a) and submitted for filling		
	closed Articles of Amendment and return all correspondence concernir			
		MOHAMED KASSAMALI Name of Person		
		Firm/Company		
		4882 NW 101 ST Address		
		CORAL SPRINGS, FLORIDA 33076 City/State and Zip Code		
	E-n	MOHAMED346@GMAIL.COM mail address: (to be used for future annual report notification)		
For fur	ther information concerning this ma	atter, please call:		
	PAUL LABINER, ES	#* ()		
	Name of Person	Area Code & Daytime Telephone Number		
Enclose	ed is a check for the following amou	ount:		
<b>₹</b> \$25	00 Filing Fee \$30.00 Filing Certificate	ng Fee & S55.00 Filing Fee & S60.00 Filing Fee, te of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) (additional copy is enclosed)		
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Section		



### RECEIVED

11 NOV 18 PM 4:00

# FLORIDA DEPARTMENT OF STATE Division of Corporations

SECRETARY OF STATE TALLAHASSEE, FLORIDA

November 15, 2011

MOHAMED KASSAMALI 4882 NW 101 ST CORAL SPRINGS, FL 33076

SUBJECT: KASSAMALI MANAGEMENT LLC Ref. Number: L11000125471

We have received your document for KASSAMALI MANAGEMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 211A00025889

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF 7011 NOV 18 PM 3: 28

# KASSAMALI MANAGEMENT, LLC SECRETARY OF STATE (Name of the Limited Liability Company as it now appears on Table (Hass SEE, FLORIDA (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>NOVEMBER 3, 2011</u> and assigned Florida document number L110000125471

This amendment is submitted to amend the following:

¥. . . .

## A. If amending name, enter the new name of the limited liability company here:

## KASNER MANAGEMENT, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

# Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

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</u> or <u>Managing Member being added or removed from our records</u>:

···-----

··.. .

MGR = Manager MGRM = Managing Member 1

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E. S.

<u>Title</u>	<u>Name</u>		Address	Type of Action
				Add
		<u> </u>		<b></b>
				Remove
D. If amend	ling any other infor	mation, enter change(	s) here: (Attach additional sheets, if	PILED SECKETARY OF STATE
Dated		Maan	r authorized representative of a member	<b>q</b>
		( мона	MED KASSAMALI	
			printed name of signee Page 2 of 2	
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Filing Fee: \$25.00