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EXAMINER

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COVER LETTER

TO: Registration S Division of Co						•
. Division of Ci	. por actors					
SUBJECT:		Khalil Group LLC				•
	Name of Lim	ited Liability Company				
•		•				
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.				
Please return all corresp	oondence concerning this matte	r to the following:				
		Muhamad Barazi				
		Name of Person		_		
	D-	nani 8 Khalil Casumil I C				
	Barazi & Khalil Group LLC Firm/Company			=		
				£	2	
2158 Colonial Blvd. Unit B				=		
•	•	Address			ZDÍI DEC -	-
	Fort Myers, FI 33907		- 55 - 55 - 55 - 55	6	Γ	
•		City/State and Zip Code			7	
•	E-mail address;	barazi56@yahoo.com to be used for future annual report r	notification)		.5	C.
For further information	concerning this matter, please			要用.	(99):	
Mu	hamad Barazi	at (239)	939-4299			
Name	of Person		time Telephone Numbe	er	•	
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 enclo	sed) Certified	ate of Stati		ed)
Regist Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 assee, FL 32314	STREET/COU Registration Se Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations g . : Center Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Barazi & Khal (<u>Name of the Limited Liability Compa</u> (A Florida Limited I	lil Group LLC my as it now appears on our records. Liability Company))				
The Articles of Organization for this Limited Liability Company Florida document number L11000135091	were filed on <u>November 30,2</u>	2011 and assigned				
This amendment is submitted to amend the following:		,				
A. If amending name, enter the new name of the limited liab	oility company here:					
The new name must be distinguishable and end with the words "Lim"	ited Liability Company," the designation	on "LLC" or the abbreviation				
Enter new principal offices address, if applicable:	2158 Colonial Blvd. Unit B	***				
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers, Florida 33907	201				
Enter new mailing address, if applicable:	N/A	50 元				
(Mailing address MAY BE A POST OFFICE BOX)						
,		AND WAR				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		er the name of the new				
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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	nager Managing Member	•	
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			-
	<u> </u>		Add Remove
			Add
			Remove
			A Remove
			Remove
		·	Add
D. If amen	ling any other information, enter	r change(s) here: (Attach additional sheets, if necess	_ _
	·		
			
Dated	(461 (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	Signature of a	member or authorized representative of a member Muhamad Barazi	·····
		Typed or printed name of signee	<u></u>

Page 2 of 2

Filing Fee: \$25.00