U12000045726

_____
(Requestor's Name)

_____
(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE
APR 10 2012
EXAMINER

COVER LETTER

TO: Registration Section
        Division of Corporations

SUBJECT: Kadcae LLC
_____
        Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Andres Fernandez
_____
        Name of Person

Kadcae LLC
_____
        Firm/Company

5246 Adair Oak Dr
_____
        Address

Orlando, FL 32829
_____
        City/State and Zip Code

booking@kadcae.com
_____
        E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andres Fernandez   at (407) 490-6035
_____
        Name of Person   Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $25.00 Filing Fee   ☐ $30.00 Filing Fee &   ☐ $55.00 Filing Fee &   ☐ $60.00 Filing Fee,
                            Certificate of Status   Certified Copy   Certificate of Status &
                                                         (additional copy is enclosed)   Certified Copy
                                                                                     (additional copy is enclosed)

MAILING ADDRESS: STREET/COURIER ADDRESS:
Registration Section   Registration Section
Division of Corporations   Division of Corporations
P.O. Box 6327   Clifton Building
Tallahassee, FL 32314   2661 Executive Center Circle
                                    Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2012 APR -9 AM 11: 08

FILED

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Kadooe LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 4/3/12 and assigned
Florida document number L12000045726

This amendment is submitted to amend the following:

A. If amending name, <u>enter the new name of the limited liability company here</u>:

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5240 Adair Oak Dr
Orlando, FL 32829

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 registered agent and/or the new registered office address here</u>:

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, <u>Signature of New Registered Agent</u>

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> <u>or Managing Member being added or removed from our records</u>:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Andres Fernandez	5240 Adair Oak Dr Orlando, FL 32829	☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _April 5th_ , _2012_ .

[signature]

Signature of a member or authorized representative of a member

Andres Fernandez
Typed or printed name of signee

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Filing Fee: $25.00