L000079420 FI Division of

Florida Department of State Division of Corporations

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To:

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Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

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Fax Number : (323) 962-3889

Enter the email address for this business entity to be used for fu annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KANDELSMITH LLC

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DEC 27 2012

COVER LETTER

| TO: Registration S Division of Co | | |
|--------------------------------------|--|--|
| SUBJECT: KANDE | SMITH LLC | |
| SUBJECT: | (Name of Limited Liability Company) | |
| The enclosed Articles of | Amendment and fee(s) are submitted for filing. | |
| Please return all corresp | ondence concerning this matter to the following: | |
| | Barbara Dang | |
| | (Name of Person) | |
| | Legalzoom.com, Inc. | |
| | (Firm/Company) | |
| | 100 W. Broadway Suite 100 | |
| | (Address) | |
| | Glendale, CA 91210 | |
| | (City/State and Zip Code) | |
| For further information | concerning this matter, please call; | |
| Barbara Dang | at (323) 962-8600 | |
| (Name | of Person) (Area Code & Daytime Telephone Number) | |
| Enclosed is a check for | he following amount: | |
| \$25.00 Filing Fee | \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

DEC 26 AM 8:

KANDELSMITH LLC ed Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) (Name of the Limited The Articles of Organization for this Limited Liability Company were filed on 06/14/2012 and assigned Florida document number _L12000079420 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) (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)

| MGR = Mar MGRM = M | nager Ianaging Member | | |
|-----------------------|-----------------------------------|--|---|
| <u>Title</u> | Name | Address | Type of Action |
| MGRM | RACHEL SMITH | 1860 NW 34TH ST. GAINESVILLE FL 32605 US | Add Remove |
| MGRM | Rita J. Smith | 1860 NW 34TH ST. GAINESVILLE FL 32605 US | Add Remove |
| | | | Add |
| | | | Add |
| | | | Add Remove |
| <u></u> | | | Add Remove |
| D. If amend | ling any other information, enter | change(s) here: (Attach additional sheets, if nece | 12 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 |
| | | | DEC 26 AH |
| Dated De | ecember 20. | 2012. | 8: 11 |
| | Rita | menuber or authorized representative of a member | |

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Filing Fee: \$25.00