

LI2000109259

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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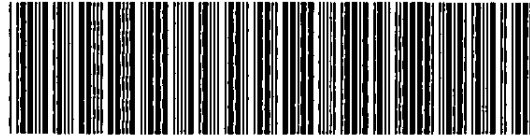
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan SEP 20 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CaliBing Trade Group, Import / Export, 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:

Ryan M. Kuhn

Name of Person

KTG Import Export LLC

Firm/Company

550 Okeechobee Blvd Apt #1114

Address

West Palm Beach, FL 33401

City/State and Zip Code

ryanmkuhn@outlook.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ryan M. Kuhn

Name of Person

at (203)

482-0062

Area Code & Daytime Telephone Number

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 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**

FILED
12 SEP 19 PM 12:09

CaliBing Trade Group, Import / Export, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on August 24, 2012 and assigned Florida document number L12000109259.

This amendment is submitted to amend the following:

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

KTG Import Export LLC

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:

550 Okeechobee Blvd Suite 1114

(Principal office address MUST BE A STREET ADDRESS)

West Palm Beach, FL 33401

Enter new mailing address, if applicable:

550 Okeechobee Blvd Suite 1114

(Mailing address MAY BE A POST OFFICE BOX)

West Palm Beach, FL 33401

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:

Ryan M. Kuhn

New Registered Office Address:

550 Okeechobee Blvd Suite 1114

Enter Florida street address

West Palm Beach

Florida

33401

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 = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Ryan M. Kuhn	550 Okeechobee Blvd Suite 1114 West Palm Beach, FL 33401	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Kelly Trochez	550 Okeechobee Blvd Suite 1114 West Palm Beach, FL 33401	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

N/A

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 12 SEP 19 PM 12:09
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated September 16, 2012



Signature of a member or authorized representative of a member

Ryan M. Kuhn

Typed or printed name of signee