Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Email	Address:		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KURLY'S SHENANIGANS LLC

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Corporate Filing Menu

A. LUNT
DEC 12 2012
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: KURLY'S SHENANIGANS LLC		
	ited Liability Company)	141.
The enclosed Articles of Amendment and fee(s) are sub-	emitted for filing.	THOUSE IN PHIZ
Please return all correspondence concerning this matter	to the following:	
Parhara Dana		OF STA
Barbara Dang	(Name of Person)	·
	(≅m en
Legalzoom.com, Inc.		
	(Firm/Company)	
100 W. Broadway Su	rite 100	
	(Address)	
Glendale, CA 91210		
	(City/State and Zip Code)	
For further information concerning this matter, please ca	all:	
Barbara Dang	at (323) 962-8600	
(Name of Person)	(Area Code & Daytime Telephone Number	er)
Enclosed is a check for the following amount: \$\sum_\$25.00 \text{ Filing Fee} \sum_\$30.00 \text{ Filing Fee & Certificate of Status}	(additional copy is enclosed) Certified	ite of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KURLY'S SHENANIGANS LLC				
(Name of the Limited Llability Company as it now appears on our records.) (A Florida Limited Liability Company)				
(A Florida Similea Blashity Company)				
The Articles of Organization for this Limited Liability Company were filed on 10/10/2012				
Florida document number <u>L12000129028</u>	7 mg.			
This amendment is submitted to amend the following:	The state of the s			
A. If amending name, enter the new name of the limited liability company here:	į			
Kurly Shenanigans LLC				
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviate	tion			
"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:	iew			
New Registered Office Address: (Enter Florida street address)				
(Enter Moriau Street address)	(Enter Monda street daaress)			
, Florida				
(City) (Zip Code)	_			
	_			
New Registered Agent's Signature, if changing Registered Agent:	_			

(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 Type of Action Title. Name <u>Address</u> DbA □ Remove ☐ Add □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated December 20/2 a member or authorized representative of a member Kurtis Beliveau Typed or printed name of signee

Page 2 of 2
Filing Fee: \$25.00