L12000160745

(R	equestor's Name)
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Pho	ne #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Na	ame)
(D	ocument Numbe	r)
Certified Copies	Certificate	es of Status
Special Instructions to	Filing Officer:	

Office Use Only



500276882955

09/21/15--01036--010 **25.00



SEP 22 2015 J SHIVERS

COVER LETTER

TO:	Registration Se Division of Cor								
SUBJE	KART 1, L	LC							
SUDJE	.C.I.	Name of Limited Liability Company							
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.						
Please	return all correspo	ndence concerning this matter	to the following:						
		Name of Limited Liability Company stof Amendment and fee(s) are submitted for filing. sepondence concerning this matter to the following: James A. Byrne, Esquire Name of Person Firm/Company 540 - 4th Street North Address St. Petersburg, FL 33701 City/State and Zip Code floridalaw@mindspring.com E-mail address: (to be used for future annual report notification) on concerning this matter, please call: at (727) 898-3273 . ne of Person To the following amount: or the following amount:							
			Name of Person						
			Firm/Company						
		540 - 4th Street North							
		Address							
		St. Petersburg, FL 33701							
			City/State and Zip Code						
For fur	ther information co		•	cation)					
James	Byrne		727 898-3273 at (
	Name of	Person	Area Code Daytime	Telephone Number					
Enclose	ed is a check for th	e following amount:							
\$25	5.00 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

KART I, 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 12/26/2012 and assigned Florida document number L12000160349 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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, 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 Florida

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 605, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = **Authorized Member**

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BERTRAND OLLIER	152 107TH AVE.	Add
		TREASURE ISLAND, FL 33706	■ Remove
			Change
MGRM	NADIA OLLIER	152 107TH AVE.	Add
		TREASURE ISLAND, FL 33706	■ Remove
			Change
MGR	CHRISTOPHE DUFOUR	5681 EDISON PLACE	= Add
		CARLSBAD, CA 92008	Remove
			☐ Change
			□ Remove
			☐ Change
			□ Adđ
		<u> </u>	□ Remove
			Change
			□ Remove
			□ Change

							heets, if nec		
									
					· · · · · · · · · · · · · · · · · · ·	A*			· · - · - · ·
		·							
			- · · · · · · · · · · · · · · · · · · ·						
									
								雪 。	
									Ćī S
-								7.23 - 7. 23 77.	- 5
							·		N
								MA Ma	⊅ 6
								i i	
			·					<u> </u>	œ.
								要用	@
Mastiva data i	if athom than the d						/ A!		
effective date i	if other than the d is listed, the date must l	be specific a	nd cannot b	e prior to d	ate of filing	or more tha	(opti n 90 days after	filing.) Pursua	ant to 60
	inserted in this bloc tive date on the Dep				statutory	filing requ	irements, thi	s date will no	ot be lis
Jedinom 3 ence	inve date on the Dep	om triicin oi	Sizic STC	coras.					
									
e recora spec	cifies a delayed or after the reco	effective rd is files	date, bu	ut not a	n effecti	ve time,	at 12:01 a	a.m. on th	e earl
THE SOUT U	y arter the reco	iu is iliet							
9/	117	•	2015						
ated			-,	·					
		12		•					
	_ amy	ignature of) my		d some	ntion of	amba.		

Page 3 of 3

Filing Fee: \$25.00