Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : GASSMAN & ASSOCIATES, P.A.

Account Number: 075350000514 Phone : (727) 442-1200 Fax Number

: (727)443-5829

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KALANI HOLDINGS, L.L.C.

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Electronic Filing Menu

Corporate Filing Menu

Help

L Buren OCT 9 2013.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KALANI HOLDINGS, L.L.C.		
(Name of the Limited Liab (A Flori	ility Company as it now appears on our reco	ords.)
The Articles of Organization for this Limited Liability Florida document number L13000070914	- ···	and assigned
This amendment is submitted to amend the following	ât:	
A. If amending name, enter the new name of the	limited liability company here:	13 TALL
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the design	enation "LLC for the asserviation
Enter new principal offices address, if applicable:		mic M
(Principal office address MUST BE A STREET AL	DDRESS)	P € 0
		9: 21 ORIDA
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX		
B. If amending the registered agent and/or re registered agent and/or the new registered office a Name of New Registered Agent:		, enter the name of the new
New Registered Office Address:	Enter Florida s	treet address
	7 7 7	orida
	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.

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11 1	111111	1.	- 3

8PM GASSMAN LAW ASSOCIATES P. A.

OCT. 8. 2013 1:58PM

MGR = Manager

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:

MGRM = Managing Member <u>Title</u> Name Address Type of Action **MGR** EQUBAL KALANI 2148 HARBOR VIEW DRIVE DUNEDIN, FL 34698 **√**_Remove **EQUBAL KALANI** 2148 HARBOR VIEW DRIVE MGRM DUNEDIN, FL 34698 Remove AFROSE KALANI 2148 HARBOR VIEW DRIVE **MMBR** DUNEDIN, FL 34698 تت Remove Remove

D. If amending any other informatio	n, enter change(s) here: (Attach additional sheets, if necessary.)
	
Dated OCTOBER 8	2013
Ost-	· · · · · · · · · · · · · · · · · · ·
-	ure of a member or authorized representative of a member 1AN, Authorized Representative
ALAN S. GASSIV	Typed or printed name of signer

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Filing Fee: \$25.00

13 OCT -8 AM 9: Z