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NOV 1 3 2013

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

SDKB Partnership, 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:

Brian E. Langford, Esquire

Name of Person

Langford & Myers, P.A.

Firm/Company

1715 W. Cleveland St.

Address

Tampa, FL 33606

City/State and Zip Code

brian@langfordmyers.com

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

For further information concerning this matter, please call:

Brian E. Langford, Esq.

*^{___}*813_\251-5533

Name of Person

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

SDKB Partnership, LLC				
(<u>Name of the Limited Liabi</u> (A Florid	ility Company as it now appears on our da Limited Liability Company)	records.)	_	
The Articles of Organization for this Limited Liability	y Company were filed on July 1, 201	13 ar	nd assigr	ned
Florida document number L13000093738				
This amendment is submitted to amend the following	;			
A. If amending name, enter the new name of the l	limited liability company here:			
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the d	esignation "LLC" o	r the abb	reviatior
Enter new principal offices address, if applicable:		<u> </u>	2813	
(Principal office address MUST BE A STREET AD	DDRESS)		AON E	gyrapite .
		- 취급 경우		
Enter new mailing address, if applicable:		ਜ਼ਿਲ੍ਹ ਜ਼ਿਲ੍ਹ ਜ਼ਿਲ੍ਹ		T.
(Mailing address MAY BE A POST OFFICE BOX)				
		O.T.	61	
B. If amending the registered agent and/or registered agent and/or the new registered office a		rds, <u>enter the na</u>	me of 1	t <u>he new</u>
Name of New Registered Agent:				
New Registered Office Address:	Enter Floric	da street address		
		, Florida		
	City		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

Title <u>Name</u> Address Type of Action 12251 Lexington Park Dr., #206 **MGRM** KB Investments International, LLC Tampa, FL 33626 Remove 5326 Van Dyke Road **MGRM** OC Global Technologies, LLC Lutz, FL 33558 Remove 5326 Van Dyke Road Skip Drish MGR ✓ Add Lutz, FL 33558 Remove Remove Remove

. If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Hed Nov	vember 82013
	Signature of a member or authorized representative of a member
	Brian F. Langford, Esquire

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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