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Office Use Only



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B. BOSTICK AUG 3 0 2013 EXAMINER

COVER'LETTER

TO: Registration Section Division of Corpor		: ** **********************************	•			
SUBJECT: THE B	OND 3304, I	LLC.	•			
SUBJECT:		ted Liability Company				
The enclosed Articles of Am	endment and fee(s) are sub	omitted for filing.				
Please return all corresponde	ence concerning this matter	to the following:				
	ILEANA D. \	/ILLARROEL				
-		Name of Person				
_						
		Firm/Company				
	8950 SW 74	TH CT STE 2201				
-		Address				
	MIAMI, FL 3	3156				
-		City/State and Zip Code				
-	E-mail address: (1	to be used for future annual report notificat	on)			
For further information conc	erning this matter, please c	all:		JAL JAC	201	
ILEANA VILL	ARROEL	at ()		LAHA	2013 AUG	-a, ;
Name of Pe	rson	Area Code & Daytime To	lephone Number	SEL E	29 PM	<u>.</u>
Enclosed is a check for the for	ollowing amount:			<u> </u>	بب	•
■ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Fili Certificat Certified (additiona	e of Stati Copy		ed)

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

Company as it now appears on Limited Liability Company)	our records.)	
Company were filed on $\frac{08/14/2}{2}$	2013	and assigned
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ds "Limited Liability Company,"	the designation "LL	C" or the abbreviatio
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tered office address on our r ress here:	records, <u>enter th</u>	e name of the nev
Futor F	Norida street addri	255
Emei 1		
City	, Florida	Zip Code
<u>i</u>	dered office address on our ress here: Enter F	RESS) Rered office address on our records, enter the ress here: 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 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 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>	Address	Type of Action
MGRM	KSV HOLDINGS, LTD	8950 SW 74TH CT. STE 2201	Add
		MIAMI, FL 33156	Remove
			-
			Add
			Remove
			Add
		ia.	
			Remove
			29
	1979-7-1-1-1970-1		Add Add Remove
			Add
		· · · · · · · · · · · · · · · · · · ·	Remove
			Add
			Remove

аше	ending any other information, enter change(s) here: (Attach additional sheets, if necessary)
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	I Reau dit
	Signature of a member of authorized representative of a member
	ILEANA D. VILLARROEL as Authorized Representative.
	Typed or printed name of signee

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Filing Fee: \$25.00

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