L/3000128194

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	<u>_</u>
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Docu	ıment Number)	
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14 JAN 30 PM 2: 57
SECKETARY OF STATE

JAN \$ 0 2014 T. BROWN

COVER LETTER

TO:	Registration Secti Division of Corpo			
SUBJE	ССТ:	Name of Limi	ited Liability Company	
The end	closed Articles of Ar	mendment and fee(s) are sub	omitted for filing.	
Please	return all correspond	lence concerning this matter	to the following:	
		GI	LBERT L. FELICIANO	
			Name of Person	
		· · · ·	Firm/Company	
		2	237 PIPESTONE CT	
			Address	
			ORLANDO, FL 32818	
		GII	City/State and Zip Code BERT@333EntCo.com	
		Ê-mail address: (i	to be used for future annual report no	dification)
For fur	ther information con	cerning this matter, please of	call:	
	GILBERT Name of P	L. FELICIANO	at (407) Area Code & Davi	758-8422 me Telephone Number
Enclose	ed 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**

14 JAN 30 04

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	KNEK ENEK	GY NOW LLC	$SEr_{\mathcal{D}E}$.	PM 2:57
(Name of the Limite	ed Liability Compa- (A Florida Limited I	ny as it now appears liability Company)	SECONDO SEE	OF STATE
The Articles of Organization for this Limited Lie Florida document number <u>L13000128194</u>	ability Company	were filed on	09/10/13	and assigned
his amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabi	ility company her	<u>'e</u> :	
N/A			··	
he new name must be distinguishable and end with the v	words "Limited Liab	ility Company," the de	esignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	2237 PIPES	TONE CT	
(Principal office address MUST BE A STREET ADDRESS)		ORLANDO, I	FL 32818	
			- · · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:		2237 PIPES	TONE CT	
Mailing address MAY BE A POST OFFICE BOX		ORLANDO, I	FL 32818	
				<u> </u>
			our records, <u>enter</u>	the name of the
	fice address here		our records, <u>enter</u>	the name of the
egistered agent and/or the new registered of	fice address here	E: . FELICIANO STONE CT		the name of the
egistered agent and/or the new registered off Name of New Registered Agent:	GILBERT L	E: . FELICIANO STONE CT	our records, <u>enter</u>	the name of the
	GILBERT L	E: . FELICIANO STONE CT		

1

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. Orgif this document is being filed to merely reflect a change in the registered office address, thereby confirm that the kipsised liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR ≈ Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	MIKE ATTARDI	1330 WHITNEY ISLE DE	₹.
		WINDERMERE, FL 3478	,
MGR	GILBERT L. FELICIANO	2237 PIPESTONE CT	
		ORLANDO, FL 32818	[] Remove
			□ Кеточе
			[] Add
			C Remove
			[3] Add
			□ Remove
			🖸 Add
			_C Remove

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01/	30/	2014	10:	57

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FEDEX OFFICE

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PAGE 03

D.	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A			
	-			
Е.	Effect (The eff	tive date, if other than the date of filing: [continual] [continual]		
	Dated	Gillrust I Felle		
		Signature of a member or authorized representative of a member		
		GILBERT L. FELICIANO		
		Typed or printed name of signed		

Page 3 of 3

Filing Fee: \$25.00