## L13000165867

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
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## COVER LETTER

Division of Co		•6	•
KIERMIC SUBJECT:	K, LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	KIERSTIN BRAWNER		
		Name of Person	
	KIERMICK, LLC		
	·	Firm/Company	<del> </del>
	3074 CASA RIO CT		
		Address	
	RIVIERA BEACH, FL 33	418	
		City/State and Zip Code	<del></del>
	mbbillstobepaid@gmail.com		
		to be used for future annual report notifi	cation)
For further information of	concerning this matter, please c	all:	
KIERSTIN BRAWNER		561 777-6175	
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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

FILED 2015 JUN -8 PM 2: 25

SECRETARY OF STATES TALLAHASSEE, FLORIDA

Kie	Duck 110	THE TIMOULE, LONGA
(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company	ears on our records.)
The Articles of Organization for this Limited L	iability Company were filed on _	NOVEMBER 27, 2013 and assigned
Florida document number L13000165863		
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company	here:
The new name must be distinguishable and contain the	words "Limited Liability Company," the	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
registered agent and/or the new registered o	office address here:	on our records, <u>enter the name of the ne</u>
Name of New Registered Agent:	KIERSTIN BRAWNER	
New Registered Office Address:	3074 CASA RIO CT	lorida street address
	RIVIERA BEACH  City	, Florida 33418 Zip Code
New Registered Agent's Signature, if changing	•	·
	ed agent and agree to act in thi per and complete performance of istered agent as provided for in registered office address. Lher	Chapter 605, F.S. Or, if this document is

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
MGRM	KIERSTIN BRAWNER	3074 CASA RIO CT, RIVIERA BI	■ Add
			□ Remove
			Change
MGRM	MORGAN BRAWNER	<u></u>	Add
			■ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			Remove
			☐ Change
			Add
			□ Remove
			Change
			Add
			Remove
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ffective date, if other than an effective date is listed, the date ote: If the date inserted in thi ocument's effective date on the	must be specific s block does no	and cannot be pri of meet the appl	or to date of filin licable statutory	g or more than 90	(optional) days after filing.) nents, this date	Pursuant to 605 will not be liste	.0207 (3)(b) ed as the
e record specifies a dela The 90th day after the	yed effective ecord is file	e date, but r d.	not an effect	ive time, at	12:01 a.m. (	on the earlie	er of:
ated MAY 1		2015		<b>—</b>			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00