#/ 14000018843

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K.SALY EXAMINER FEB 19 2014

COVER LETTER

TO: Registration Se Division of Cor	ection porations		· •
SUBJECT: Karr's	s Sears of Oke	echobee, LLC	
30bJEC1	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Devin R. Ma	xwell, Esq.	
	*	Name of Person	
	Maxwell & M	laxwell, P.A.	
		Firm/Company	
	405 NW 3rd	Street	
		Address	
	Okeechobee	e, FL 34972 City/State and Zip Code	
13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* -*	CCity/State and Zip Code A Second Sellandmaxwell.net	
		to be used for future annual report notif	ication)
For further information c	oncerning this matter, please ca	all:	
Devin R. M	axwell, Esq.	863,763-1	119
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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 2014 FEB 18 PM 1:39

Karr's Sears of Okeechobee, LLC	TALLAU TARY OF STATE
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	TALLAHASSEE, FLORID:
The Articles of Organization for this Limited Liability Company	were filed on 2/3/14 and assigned
Florida document number <u>L14000018843</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Karr of Okeechobee, LLC	
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1157 NW 110th Street
(Principal office address MUST BE A STREET ADDRESS)	Okeechobee, FL 34972
Enter new mailing address, if applicable:	1157 NW 110th Street
(Mailing address MAY BE A POST OFFICE BOX)	Okeechobee, FL 34972
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, <u>enter the name of the new</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	. Florida
	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 605, 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 Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = .N AMRR = .	Manager Authorized Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
			□ Add
			☐ Remove
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Filing Fee: \$25.00