

L14000055932

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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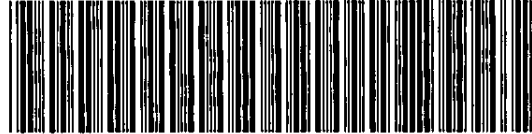
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC - 5 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KBA 3, 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:

Romney C. Rogers, Esq.

Name of Person

Rogers, Morris & Ziegler LLP

Firm/Company

1401 East Broward Boulevard, Suite 300

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

lyonbenefit@gmail.com

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

For further information concerning this matter, please call:

Romney C. Rogers, Esq.

at (954) 400-4115

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

KBA 3, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04/04/2014 and assigned Florida document number L14000055932.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2640 Bayview Drive

(Principal office address MUST BE A STREET ADDRESS)

Fort Lauderdale, FL 33308

Enter new mailing address, if applicable:

757 SE 17th Street, #780

(Mailing address MAY BE A POST OFFICE BOX)

Fort Lauderdale, FL 33316

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Austin Ensor

New Registered Office Address:

2640 Bayview Drive

Enter Florida street address

Fort Lauderdale

Florida 33308

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

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Kerri Pillinger	1598 Monarch Drive	<input type="checkbox"/> Add
		Venice, FL 34293	<input checked="" type="checkbox"/> Remove
MGR	Austin Ensor	757 SE 17th Street, #780	<input checked="" type="checkbox"/> Add
		Fort Lauderdale, FL 33316	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated November 17, 2014.



Signature of a member or authorized representative of a member

Austin Ensor, Mgr.

Typed or printed name of signee