

L15000070891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2016 JUN - 8 P 3:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S Warren

JUN 09 2016

Alan M. Kahn  
5085 Asbury Parke Drive  
Apartment 304  
Lakeland, Florida 33805-9586  
(917) 652-2323

May 27, 2016

Dear Sir/Madam,

Re: New Name for LLC: L15000070891

Please find enclosed executed documents pertaining to a request to change the name of my current LLC

(Alan M. Kahn Consulting Group, LLC)  
to  
(New Age Golden Press, LLC).

- The Mailing Address remains the same
- The name of the Registered Agent remains the same
- There are no amended changes
- The effective date will be the "Date of Filing"
- No Changes of Authorized Persons

I trust this letter and the "Articles of Amendment to Articles of Organization" are in order. Please contact me at the above telephone number should you have any questions. Many thanks for your prompt attention.

I am enclosing a check in the amount of \$60.00 to cover the following:

- \$25.00 Filing Fee
- \$30.00 Certified Copy
- \$ 5.00 Certificate of Status

Sincerely,

  
Alan M. Kahn

via: US Registered Mail  
Return Receipt

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ALAN M. KAHN CONSULTING GROUP, LLC  
Name of Limited Liability Company  
L15000070891

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALAN M. KAHN  
Name of Person

Firm/Company

5085 ASBURY PARKE DRIVE, APT. 304  
Address

LAKELAND, FL 33805-9586  
City/State and Zip Code

AKAHN516@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALAN M. KAHN at (917) 652-2323  
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**

ALAN M. KAHN CONSULTING GROUP, LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on APRIL 22, 2015 and assigned  
Florida document number L15000070891.

This amendment is submitted to amend the following:

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

NEW AGE GOLDEN PRESS, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

SAME ADDRESS, NO CHANGE

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

SAME REGISTERED AGENT, NO CHANGE

New Registered Office Address:

N/A

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.

N/A

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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

NO CHANGES -  
FROM PREVIOUS  
LLC

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

E. Effective date, if other than the date of filing: DATE OF FILING (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

MAY 27, 2016

Signature of a member or authorized representative of a member

ALAN MICHAEL KAHN

Typed or printed name of signee

2016 JUN - 8 P 3:18  
SECRETARY OF STATE  
FLORIDA

FILED