

L15 000 163841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

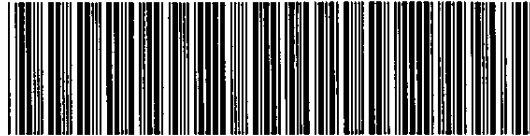
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
16 JUL 14 AM 9:14
TALLAHASSEE, FLORIDA

JUL 15 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 29, 2016

KATHY KELLY
1000 REED LANE
SIMPSONVILLE, KY 40067

SUBJECT: KK TELECOM STRUCTURES, LLC
Ref. Number: L15000163841

We have received your document for KK TELECOM STRUCTURES, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 816A00013746

KELLY COMMUNICATION STRUCTURES AND SERVICES

July 14, 2016

Ms. Yasemin Y. Sulker
Regulatory Specialist II
Florida Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: L15000163841 – Name Change Request

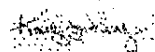
Ms. Sulker:

Thank for your time today. This letter is to notify you that I own the other company in question, Kelly Communication Services, LLC. I name both companies similarly for marketing and sales purposes. They are different companies as one performs services and the other owns structures.

Please let me know if you need anything else to proceed with recording the new name, Kelly Communication Structures, LLC for KK Telecom Structures, LLC.

Thank you again for your time and consideration!

Sincerely,



Kathy J. Kelly
770.330.9784

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: KK Telecom Structures, 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:

Kathy Kelly

Name of Person

Kelly Communication Structures, LLC

Firm/Company

1000 Reed Lane

Address

Simpsonville, KY 40067

City/State and Zip Code

kathy@retelprofessionalservices.com

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

For further information concerning this matter, please call:

Kathy Kelly

770 330-9784

Name of Person

at (_____) _____
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

KK Telecom Structures, 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 9/25/2015 and assigned
Florida document number L15000163841

This amendment is submitted to amend the following:

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

Kelly Communication Structures, LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3708 Stonewall Circle

Atlanta, GA 30339

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1000 Reed Lane

Simpsonville, KY 40067

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:

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 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>
AMBR	James E. Kelly	1658 Tonple Johnson Road	<input checked="" type="checkbox"/> Add
		Loganville, GA 30052	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Kathy J. Kelly	1000 Reed Lane	<input type="checkbox"/> Add
		Simpsonville, KY 40067	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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MELANASSÉE, FLORIDA

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.

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

Signature of a member

Signature of a member or authorized representative of a member

Typed or printed name of signer