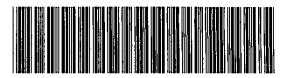
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August 25, 2016

LIONS & KINGS L.L.C. SANDY VAN DOVER 5200 SIGSTROM DR. CARSON CITY, NV 89706

SUBJECT: LIONS & KINGS L.L.C. Ref. Number: L16000154688

We have received your document for LIONS & KINGS L.L.C. and your check(s) totaling \$25.00. 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.

The document number of the name conflict is P16000045859 "KING OF LIONS LLC".

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.

Karen A Saly Regulatory Specialist II

Letter Number: 916A00018150

## **COVER LETTER**

TO:	Registration Se Division of Cor			
	Lions & Ki	ngs L.L.C.		
SUB	JECT:	Name of Lim	ited Liability Company	
The e	enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Pleas	e return all correspo	ondence concerning this matter	to the following:	
		Sandy Van Dover		
			Name of Person	
		Kings & Lions L.L.C.		
			Firm/Company	<u> </u>
		5200 Sigstrom Drive		
			Address	***
		Carson City, NV 89706		
		sandy@klgspice.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual repor	t notification)
For fi	urther information c	oncerning this matter, please ca	all:	
Kat I	Norris		775 443-022 at ()	29
	Name o	f Person	Area Code Da	sytime Telephone Number
Enclo	osed is a check for the	ne following amount:		
<b>=</b> \$	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**

2016 SEP 27 PM 4:00

Lions & Kings L.L.C.

(Name of the Limited Liability Company as it now appears on our

The Articles of Organization for this Limited Liability Company were filed on August17,2016 and assigned Florida document number L16000154688  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  Kings & Lions Nevadal. L. C.  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)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the ne registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  City Zip Code	(A Florida Li	mited Liability Company)	ni dai records.)	MASSEE PESTAN
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		City		Zip Code

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: FILED 2016 SEP 27 PM 4: 00 MGR = Manager AMBR = Authorized Member Title ' <u>Address</u> <u>Name</u> Type of Action \_\_DTATdd □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change ☐ Add □ Remove \_ Change \_□ Add □ Remove ☐ Change □ Add ☐ Remove

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