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**S Warren** MAY 1 5 \ 2017

# **COVÉR LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: KCENERGI 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:	
Gary D Eaton Name of Person	
KC energi LLC Firm/Congany	
2641 Parisian Court	
Penta Gorda FL 33950 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (9/8) 671 2008  Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$\Bigcup \$60.00 Filing Fee, 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

(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Clability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L 16000 1725.63</u>	were filed on $09/09/20/6$ and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	NA		
(Principal office address MUST BE A STREET ADDRESS)			
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 or registered agent and/or the new registered office address her			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, Publis desiment is		

Page 1 of 3

If Changing Registered Agent, Signature of New Registered

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Geno Bratanov	dba Intec Capital LLC 1949 E. Sunshine Street Suite 1-130 Spring Field, MO 65800	Remove
MCK	Roman Cioli Gamelin	dba RCG Technical Sonwies	Change
		P.O BOX 2451	Remove
		Breckenridge CO 80420	
			Add
			Remove
			_ Change
			Add
			_□ Remove
			_□ Change
			<b>_</b> Add
		A	FILED FILED STATE
		AUNA	STATE RESE
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_	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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effe e: I	ve date, if other than the date of filing:  (optional)  ctive 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 605.0 f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed int's effective date on the Department of State's records.	207 (3) as the
reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.	of:
ed _	8th Max 2017.	
	A A BEST TO THE STATE OF THE ST	
	Signature of a member or authorized representative of a member	
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