## 118000281596

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Document Number)
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MAY 0 8 2019 S. YOUNG



April 8, 2019

KHADARR MARTIN K-ROC PROPERTY SERVICES, LLC 4141 E 15TH STREET #126 PANAMA CITY, FL 32404

SUBJECT: K-ROC PROPERTY SERVICES, LLC

Ref. Number: L18000281596

We have received your document for K-ROC PROPERTY SERVICES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

ALL PAGES MUST BE RECEIVED ONLY PAGE 1 OF 3 RECEIVED

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 plese call (850) 245-6050.

Shelia H Young Regulatory Specialist II Letter Number: 119A00007029

:27 EEEE

## **COVER LETTER**

TO: Registration Sect Division of Corpo			
SUBJECT: K-R	Name of Lin	The Service, LLC mited Liability Company	,
The enclosed Articles of Ar	nendment and fee(s) are sul	bmitted for filing.	
Please return all correspond	ence concerning this matter	r to the following:	
		Name of Person  Property Sewice  Firm/Company	eo, LLC
	4141 F	15th St #	12-10
		. 15th St #	
	Panama	City/State and Zip Code	404
_	Khadari	City/State and Zip Code  V 2 6 Yahob, C  to be used for future annual report notifi	em
For further information conc		•	
Lisa Spe	5 A 1	at (721 ) 295-	7536 Telephone Number
Enclosed is a check for the fo	ollowing amount:		
\$25.00 Filing Fee	3 \$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:

TO:

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

K-RUC Property S (Name of the Limited Liability C	ervices, UC	
( <u>Name of the Limited Liabibly C</u> (A Florida Lin	ompany as it now appears on our records. nited Liability Company)	)
The Articles of Organization for this Limited Liability Com Florida document number <u>L 18000281596</u>	pany were filed on 12 16 301	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited		
Roc Property Service The new name must be distinguishable and contain the words "Limited	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:	PIA	
(Principal office address MUST BE A STREET ADDRES	<u> </u>	<del>-</del> 5
Enter new mailing address, if applicable:	N/A	FILE MAY -7
(Mailing address MAY BE A POST OFFICE BOX)		
		- CO
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	ed office address on our records, here:	,
Name of New Registered Agent:	ladarr Martin	
New Registered Office Address:	Enter Florida street address	
	T21	:.a
	City	ida 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>	Address	Type of Action
	7/1		
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			Change
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			☐ Change

	D/K
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If an effecti Note: If	e date, if other than the date of filing:
	rd specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlier of 0th day after the record is filed.
Dated	His Joints, 2019.  Signature of a member or authorized representative of a member.
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00