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EXAMINER

COVER LETTER

	ration Section n of Corporations		
SUBJECT:	J.K	.C. WEN, L.C.	
		imited Liability Company	
The enclosed Ar	ticles of Amendment and fee(s) are	submitted for filing.	
Please return all	correspondence concerning this ma	tter to the following:	
		Sam W. Chawkin	_
		Name of Person	
		J.K.C. Wen, L.C.	
Firm/Company			
	700 Par	k Regency Place NE, Suite 2403	
		Address	-
		Atlanta, GA 30326	AON 6002
	City/State and Zip Code		
	E-mail addres	samchawk@comcast.net s: (to be used for future annual report notification)	SET TO
For further infor	mation concerning this matter, pleas	se call:	AH IO: 39
	Sam W. Chawkin Name of Person	at (404) 261-2164 Area Code & Daytime Telephone Numbe	
	Name of Person	Area Code & Daytime Telephone Numbe	;;
Enclosed is a che	eck for the following amount:		
₹ \$25.00 Filing	Fee \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ate of Status &
	MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	J.K.C. WEN, L.C.				
(<u>Na</u>	me of the Limited Liability Company as it now appearable (A Florida Limited Liability Company)	ars on our records.)			
The Articles of Organization	for this Limited Liability Company were filed on	09/22/1995	and assigned		
Florida document number	L95000000733				
This amendment is submitted	to amend the following:				
A. If amending name, enter	the new name of the limited liability company he	ere:			
	S & P ASSOCIATES, LLC				
The new name must be distingu "L.L.C."	ishable and end with the words "Limited Liability Comp	oany," the designation "I	LC" or the abbreviation		
Enter new principal offices	address, if applicable:				
(Principal office address MU	ST BE A STREET ADDRESS)				
			75 =		
Enter new mailing address,	if applicable:		- Consider		
(Mailing address MAY BE A	POST OFFICE BOX)		<u> अस</u> च		
B. If amending the registered agent and/or the	ered agent and/or registered office address on new registered office address here:	our records, enter t	he name of the new		
registered agent undor the	new registered office address mere.		1,4		
Name of New Regis	tered Agent:				
New Registered Off					
	E	Enter Florida street address			
	City	, Florida	Zip Code		
	City		Lip Coae		

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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Title <u>Name</u> **Address Type of Action** ___ Add Remove Remove ☐ Add ☐ Remove Remove ∏Add ___Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) November 11 2009 Dated_ Signature of a member of anthorized representative of a member

Sam W. Chawkin, Managing Member
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00



To WHOM IT MAY CONCERN:

The undersigned is a member of S/P ASSOCIATES LLC, a Florida limited liability company whose principal address is 4067 NW 35th Avenue, Lauderdale Lakes FL 33309 which was formed on January 4, 2008, but is now inactive. The undersigned, on behalf of S/P ASSOCIATES LLC, hereby releases and relinquishes all rights to use the name "S/P ASSOCIATES LLC" so that J.K.C. WEN, L.C., a Florida limited liability company, may change its name to S & P ASSOCIATES, LLC.

In Witness Whereof, this _____day of November, 2009.

S/P ASSOCIATES I

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