

LOG 000112193

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

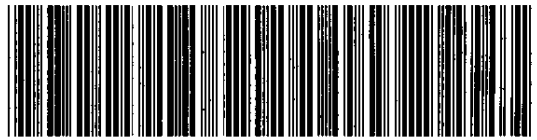
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

LOG-112193



000163753390

12/21/09--01038--011 \*\*25.00

FILED  
2009 DEC 21 AM 11:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

M. THOMAS  
DEC 22 2009  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KENDALL GRAYSON ENTERPRISES, LLC.  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LORI K. GAUSE  
Name of Person

KENDALL GRAYSON ENTERPRISES, LLC.  
Firm/Company

1035 GATEWAY BLVD. #201-185  
Address

BOYNTON BEACH, FL 33426  
City/State and Zip Code

KENDALLGRAYSON@ROCKETMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LORI K. GAUSE at ( 800 ) 829-1285  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Conv

FILED  
2009 DEC 21 AM 11:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: KENDALL GRAYSON ENT, LLC

2. (a) Principal office address of limited liability company: 2706 QUANTUM LAKES DRIVE  
 BOYNTON BEACH, FL 33426  
**(Note: MUST BE STREET ADDRESS)**

(b) Mailing address of limited liability company: 2706 QUANTUM LAKES DRIVE  
 BOYNTON BEACH, FL 33426  
**(Note: MAY BE POST OFFICE BOX)**

11-23-09  
3. Date of filing/registration in Florida

L09000112193  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: LORI K. GAUSE

Registered Office Address: 2706 QUANTUM LAKES DRIVE  
BOYNTON BEACH, FL 33426

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:** \_\_\_\_\_

**NEW Registered Office Address:** 1035 GATEWAY BLVD.  
**(MUST BE FLORIDA STREET ADDRESS)** SUITE 201-185  
BOYNTON BEACH, FL 33426

FILED  
DEC 21 AM 11:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Lori K. Gause  
Signature of a member or authorized representative of a member

LORI K. GAUSE  
Printed or typed name of signee

*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.*

Lori K. Gause  
Signature of Registered Agent

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**  
**FILING FEE: \$25.00**